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ABSTRACT

This monograph compares foster care systems of New York City and the southern region of New Jersey, focusing on each system's impact on the foster care experiences of Black, Hispanic, and White Children. Recognizing that minority children move through foster care systems at a slower pace than do White children, the report first attempts to determine what factors influence the rate with which children move through the system and either return home or find a permanent adoptive family. Second, an effort is made to identify those factors that are malleable from a policy perspective. Following a general discussion of the history and current magnitude of foster care, the position is advanced that poor overall progress in the goal of permanent homes for foster children and ethnic differentials affecting that goal result from the disorganized and ad hoc character of foster care in the nation at large. Subsequent chapters describe the system as it operates in New York City and contrasts it with a multilevel reorganized demonstration project in southern New Jersey. Innovations in the New Jersey system are described and their impact on the goal of permanency and on ethnic differentials in outcomes are assessed. In the report's final chapter, structural reasons that account for the poorer outcomes and greater ethnic discrepancies in the New York system are summarized and a number of specific policy changes are recommended. (GC)

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Hispanic Research Center
Fordham University

ED228354

# THE MINORITY FOSTER CHILD: A COMPARATIVE STUDY OF HISPANIC, BLACK AND WHITE CHILDREN

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Douglas T. Gurak
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## FOREWORD

In keeping with its commitment to the study of issues affecting minorities in general, and Hispanics in particular, Fordham University's Hispanic Research Center is proud to make this monographic study available to the interested reader. The monograph presents the findings and recommendations of a comparative study of two markedly different foster care systems, one in New York, the other in New Jersey. While examining the two foster care systems, the study undertakes evaluation research of the comparative effectiveness of the systems and examines the operation of institutionally based patterns of discrimination against minority children. Evaluation research, as an approach to the study of complicated organizations, and institutional discrimination, as a subject matter of research, are of timely importance in efforts to inform public policy and practice.

Earlier research on discrimination, particularly that which was stimulated by the historical conditions associated with World War II, sought to locate the source of discrimination in the prejudicial attitudes of persons. Consequently a multitude of studies were published on topics such as the authoritarian personality, fascist scales, and scales designed to measure the individual's perception of social distance between ethnic or racial groups. The locus of the problem of discrimination was in the person. The task of research was to relate measu es of attitudes signifying prejudice toward other groups to socialization experiences, components of personality, and the person's sociocultural and demographic characteristics. Highly individualized, this approach certainly was inadequate, though it is incontrovertibly true that such attitudes exist and that they form an important part of discriminatory practices. But the subsequent growth of a vigorous sociologically oriented social psychology in the years following World War II, combined with the increasing interest in analyzing the impact of social systems upon persons, indicated the incompleteness of reducing all discriminatory practices to individually held attitudes of prejudice. It also has roots in the very character of institutional structures such as the criminal justice system, the system of education, the health delivery establishment, and in agencies delivering other services such as foster care for children. Even when revered by the public at large for their altruism and charitable work, even when staffed by essentially "non-prejudiced" persons, such structures can systematically produce discriminatory results affecting the lives of minority persons.

The study reported here shows how discriminatory outcomes are produced by one segment of New York's foster care system. The system combines a number of structural elements: service delivery constituencies unrelated to the foster child's own community; a narrow specialization on foster care which is at the same time disconnected -- legally, philosophically, and organizationally -- from a spectrum of family and social services; charitable and religious orientation; and the common practice of placing children in homes away from their own communities. In contrast to the foster care system in New Jersey (which is different from that of New York in each of the foregoing structural characteristics) the New York system produces not only discriminatory results but delivers a comparatively

inferior quality of service to all children, minority and non-minority alike. Such outcomes, rooted as they are in the organizational character of the foster care system, are susceptible to purposefully oriented change. In the authors' language, they are policy malleable.

In this study, the issue of institutional discrimination is imbedded in the comparative analysis of the effectiveness of the two foster care systems, or, in what has come to be conceived of as evaluation research. The prevalence of evaluation research has been growing in recent years, but it still lags far behind the geometric growth of bureaucratic organizations in the last century of American life. The problem this poses is clear: if purposefully enacted bureaucratic structures are to be held accountable to the taxpayer, the charitable donor, or to the broader American public, evaluation research must be a natural part of the effort. Otherwise, issues of organizational effectiveness remain uninformed by the findings of research and are resolved entirely at the level of interactions between partisan constituencies. Evaluation research does not stand aside isolated from such interactions, nor does it remain aloof from the political process. To the contrary, it purposefully injects itself as one important voice into the process with findings and conclusions deriving from openly stated methodological procedures. The procedures are subject to professional and public scrutiny so that the basis for recommendations is understood. For this reason, evaluation research performs a unique role in the political process enmeshing bureaucracies. The reader will note with interest this study's application of a carefully developed methodology in the comparative analysis of the two foster care systems and the findings which are produced. The study extends beyond the comparative assessment of the two foster care systems' organizational products to examine the structural features producing the outcomes. The last chapter presents a series of specific and wide ranging recommendations based upon the findings.

This monograph is the ninth in a series published by the Hispanic Research Center to stimulate interest in Hispanic concerns. The first monograph reports on the health conditions of New York City's Puerto Ricans; the second presents a study of the outgroup marriage patterns of New York City's Hispanic populations; the third examines the Hispanic experience of the criminal justice system in the United States; the fourth appraises the mental health status and needs of Puerto Rican children in the New York City area; the fifth examines the adaptation and adjustment of a large group of Cuban migrants living in West New York, New Jersey; the sixth provides an ethnographic documentation of a therapeutic community working with Hispanic and Black children in the South Bronx; the seventh consists of a series of papers presented at an HRC conference focusing on the special research needs of Hispanic women; and the eighth is a training manual for the replication of all or part of the Unitas therapeutic program for children, a companion to the HRC's sixth monograph.

The Hispanic Research Center was established at Fordham University in 1977, under a grant from the National Institute of Mental Health, to work toward five major objectives: (1) to conduct interdisciplinary research on issues relevant to the mental health of the Hispanic population; (2) to increase and upgrade the number of Hispanic scholars experienced in doing research in the mental health-related disciplines; (3) to provide technical assistance to Hispanic behavioral scientists, professionals, and organizations interested in the mental health problems of Hispanic communities; (4) to develop links between individual Hispanic researchers and between these researchers and persons involved in the formulation and implementation of Hispanic relevant public policy; and (5) to disseminate information on the mental health of the Hispanic population.

We hope this monograph will be of general value to persons interested in the welfare of all children and of specific help to those persons who attend to the emotional needs of minority children.

Lloyd H. Rogler
Fordham University
May 1982

## PREFACE

This study focuses attention on some of the factors which affect the life chances of children who have become wards of the state as foster children. These children currently total close to one-half million in the United States. The reasons for their becoming foster children vary considerably. Some enter foster care because their parents find themselves unable to cope due to financial, health or other reasons. Others enter because agents of the state have determined that the home environment has failed to meet minimum standards for sustenance and protection. Yet others enter because the parents have died, been institutionalized or decided to surrender custody of their children. Finally, some may become wards of the state because this is deemed the most appropriate means of providing some form of therapy for a disability which affects the child's ability to function in society. Regardless of the cause, foster care is officially viewed as a temporary substitute parent arrangement: an arrangement that should terminate within a short period of time with the return of the child to its family and home. When return home is not feasible, the agents of the state have the responsibility of arranging for an alternative permanent family environment within the minimum possible time. This means that all necessary steps be taken to free the child for adoption and to place it in an adoptive home.

Foster care agencies do this, by and large. However, considerable debate exists concerning how well they do it and why some agencies perform these tasks better than others. Foster care agencies are a diverse lot. Systems differ immensely from state to state, within states, and even within smaller jurisdictions such as New York City. They differ in terms of factors such as the mix of services provided, the degree of autonomy from the state that they possess, the qualifications of their staffs, the populations they serve, and the organizational and political environment in which they are imbedded. Given the extent of this variation it appears surprising that more attention has not been given to how variations in structural factors influence the extent to which the core goal of rapid return of children to permanent families is fulfilled. In recent years, however, critical attention has begun to focus on the broad issue of perceived failure of foster care systems to attain their goal of permanency for a considerable proportion of foster children.

The major premises which form the foundation of this study consist of the following. First, we view the goal of permanency for foster children as an intrinsically valuable goal. That is, we, along with other observers, believe that failure to adequately meet this goal can cause considerable damage to children and families. This means that long-term foster care may, more times than not, represent a more negative outcome than the mere postponement of a positive good. In its strongest form this assumption might mean that delays in achieving permanent family outcomes can be negative in their consequences even when other aspects of care provided by foster care systems are of high quality. This study does not prove this assumption, though reference to the relevant literature is made, especially in Chapter 1.

Briefly stated, the support for the assumption comes in two forms: (1) evidence that the inherent temporary nature of foster living arrangements has negative psychological impact on children in care for extended periods; and (2) evidence that once children stay in care beyond one or two years, the probability of finding their way out of the system diminishes drastically.

The second major premise can be reduced to the statement that variations in the adequacy with which foster care systems attain the goal of permanency for the children in their care result more from the way services are routinely organized and positioned than from the motives and abilities of the workers and administrators and foster parents who provide care to foster children. In this study we refer to the patterns of organization and positioning of services as structural factors. The concept of the structure of services encompasses a broad range of factors, some of which have already been referred to in this preface. Some foster care systems rely on agencies highly specialized in one or a few tasks -- therapy or adoption procedures, for example. Other systems rely on a set of agencies each of which is set up to provide a broad spectrum of services. Some systems consist of semi-autonomous parts; while others exhibit higher degrees of centralized control by state agencies. Some systems utilize a catchment area structure in order to determine where a child or family will be served. Others rely on factors such as religion or professional assessment to determine placement. The logic underlying some of these structural differences and their presumed importance is presented in Chapter 2 and further developed in subsequent chapters. This premise receives major attention in this study.

These brief comments are intended to introduce the reader to the central issues of the analysis that follows. First, we attempt to determine what factors influence the pace with which children move through the foster care system and either return home or join a permanent adoptive family. Second, we explicitly seek to assess the extent to which structural factors can be identified as such determinants. Underlying this focus are two major concerns. First, a major impetus for our work in this area has been the well-substantiated fact that minority children move through foster care systems at a slower pace than do White children. At issue has been the question of why this is so. Does this pattern result from the more difficult problems that minority children present to foster care agencies? If not, does it flow from conscious or subconscious discriminatory acts of workers or administrators? Or can unequal outcomes result from the independent working of structural factors such as those referred to above? In analyzing these questions, we focus on the foster care experiences of Black, Hispanic and White children in the foster care systems of New York City and the State of New Jersey.

The second major concern consists of a desire to identify factors associated with variation in the rate of movement towards permanent family arrangements that are malleable from a policy point of view. This concern dictates the focus on structural determinants as much as does our intellectual desire to provide as complete an explanation as possible. While the implementation of structural or organizational changes sometimes appears impossibly difficult, and often impossibly wrong headed, it can reasonably be argued that it is easier to change the way organizations are structured and the composition of their resources than it is to change the attitudes and motivational structures of individual workers, or to change the basic social conditions which generate the need for a system of temporary placement in the first place. The key to effective action is to find structural factors which are amenable to change and which truly impact on the outcomes for which change is intended.

In order to fruitfully examine the extent to which structural factors impinge upon permanency outcomes in foster care for all children, and on the differentials between ethnic groups, we have focused on two very distinct systems: that of New York City and that of a part of New Jersey. These two systems differ along a broad continuum of structural factors ranging from the mix of services provided, to the modes of entry and placement, to the very organizational hierarchies which define the systems. These differences and their impact are further defined and analyzed in Chapters 2 through 6. It should be pointed out that the structural analysis presented in this study can be viewed as focusing on two levels. Within each system, the analysis seeks out structural determinants of the pace of movement towards

permanency and of ethnic differentials in that pace. This is done by comparing subunits of each system and seeking to find more direct indicators of structural impact. New York City's very large system consists of some 80 diverse agencies, many of which are voluntary organizations functioning through contracts with the City. This heterogeneous set of agencies offers ample opportunity for structural analysis within the city's system. New Jersey's more centralized, state-run system provides an excellent comparative foil to New York City's. Even within its system, county-based district offices differ from one another.

The New Jersey system also provides us with an opportunity for comparative analysis both within that state's system and with New York City's. New Jersey's southern region has been the site of a demonstration project which has involved the institutionalization of a complete multi-level reorganization of the manner in which services are delivered to children and families. Consequently, we are able to examine the impact of an actual structural shift over time in addition to making cross-sectional comparisons among subunits and across states. This expansive set of comparisons permits us to gain considerable insight into the role of structural factors in the attainment of permanency. Because we have been involved in an actual instance of structural modification our comprehension of the policy potential of structural change assumes a concreteness that it might not otherwise have.

## ACKNOWLEDGEMENTS

The research reported in the following chapters represents a long-term commitment to the problems surrounding foster care. The core empirical research represents work under two distinct research grants -- one from the Edna McConnell Clark Foundation and the other from the National Institute of Mental Health (Grant # 1 RO 1 MH33028).

The Edna McConnell Clark Foundation has funded several related projects which laid the groundwork for the research report. Peter Forsythe, a vice president of that institution, has been a strong supporter of our work. The Hispanic Research Center (supported by NIMH Grant #RO1MH30569) provided significant support during the analysis and writing portions of this study. The Hispanic Research Center's director, Lloyd H. Rogler, encouraged and facilitated the process of converting a mass of data from diverse sources into a form which, it is hoped, will influence the provision of services within foster care systems. The Center for Policy Research, under the direction of Amitai Etzioni, provided invaluable institutional support during all stages of both the research and the demonstration projects which constitute the background to this monograph. James Ralph and Richard Lopez of NIMH's Minority Group Center also assisted the project in numerous ways.

The list of individuals who provided significant assistance to the demonstration project and research reported here impresses us with its scope and depth. Since much of this work could not have been accomplished without those individuals, we take this opportunity to acknowledge our debts.

First and foremost, we were able to conduct the demonstration project and research because we benefitted from the cooperation of numerous officials of the governments of the States of New Jersey and New York and of New York City. In New Jersey the key individuals were Bernice Manshel, Director of the Division of Youth and Family Services (DYFS); Richard O'Grady, Deputy Director of DYFS; William Cowherd, Southern Region Administrator for DYFS; Terry Duffy and Mary Doar, Deputy Regional Administrators. Major assistance was provided by the managers of the seven district offices and the Adoption Unit of the Southern Region of DYFS. These individuals are: Marita Lingo, Fred Rhinehart, Edward Reistetter, Louis P. Starkweather, Barry Silverstein, Gail Krebs, Betsy Riegel, and Nelson Amey. Of these, Richard O'Grady should be singled out since it is he who was primarily responsible for grasping the permanency service concept, and he who had the vision to see its potential and to implement it in the Southern Region. Bill Cowherd, who shared that vision, was largely responsible for its operational success, and his enthusiasm and administrative skills were invaluable. George Berryman and his successor, Rhoda Cohen, served admirably as coordinators of the Permanency Services Program. Other persons who gave us assistance within DYFS were Celia Rechtman, Nancy McNeil. Helene Hartman and Harry Baker.

New York State's Department of Social Services granted us access to the case records of New York City's foster care children. That department worked closely with us during the early stages of the project and removed numerous technical obstacles. We have also benefitted from the insightful comments of several representatives of this department, following the preliminary presentation of the results of this study. Key actors here are: Barbara Blum, Commissioner of Social Services; Norris Phillips, Deputy Commissioner; Donald Snyder, Assistant Deputy Commissioner; Sydelle Stone Shapiro, Hannah Grossman, Tim Sheehen and Emily Young. Working closely with state officials, several officials of New York City's Human Resources Administration (HRA) eased the progress of the study considerably. Stanley Brezenoff, Administrator/Commissioner of HRA, greatly facilitated the project. Claire Pearce, Deputy Administrator of HRA in charge of Special Services for Children (SSC) and Gail M. Kong, who filled that office subsequently, played valuable roles; as did John Courtney, the Director of SSC's Assessment Unit, and Lucy Mueller, Director of SSC's Field Operations.

In both New York and New Jersey numerous individuals provided valuable input to this project. Several representatives of interest groups need to be mentioned. Leontine Young and Linda Wood of New Jersey Citizen's Committee for Children; Clara Valiente Barksdale and Elba Montalvo of the New York Council on Adoptable Children (COAC); and Kojo-Mbogba Odo of the Region 2 Adoption Resource Center at Columbia University head this list.

Several individuals worked closely with the authors at various stages of the work. Trude Lash, of the Foundation for Child Development, helped us to develop our conceptual approach to the institutional problems surrounding foster care. James R. Dumpson, of the New York Community Trust, and Fordham University, ably steered us through numerous problems of access and research design. Eve P. Smith, former Director of LCS Spaulding for Children, with Mary Goldson developed and co-directed the training of workers for the New Jersey Permanency Services Program, and also acted as consultant and trainer for the New York study. Without the benefit of both her experience and her original thinking, this study could not have been done. Edward Lehman of the Center for Policy Research and New York University was an invaluable colleague during the pilot study stage of the series of projects which form the basis of this study. Carmen Mercado, of the Hispanic Research Center (HRC) and the Puerto Rican Family Institute, critically evaluated several early drafts of this work, thereby greatly improving them. Mary M. Kritz of the Rockefeller Foundation provided similar input and benefits.

Of equal or greater importance than those already mentioned, a large and competent field staff collected the necessary data and monitored the demonstration project. Sara Lipson served as Project Coordinator from 1978 to 1980. Anita Waters assumed that responsibility in 1981 and served up to the time of this writing. Both contributed extraordinary efforts in the maintenance of order in dealings with numerous individuals, institutions and tasks. Numerous assistants worked long and competently during the data collection stages of the New Jersey Pilot project, the Permanency Services Demonstration project, and the New York City project. This team includes: Ezra Zask, Michael Berman, Randy Johnson, Paul Fibkens, Nick Psychodko, Richard Stillman, Maureen Massiah, Jaime Alvelo, Diane Sherwood, Scharlene Snowden, Stephanie Exarhakis, Marianne Gallo, Mary Serovy, and Sharon Pentel.

Projects of the size, complexity and duration of this study cannot prosper without a competent and cooperative organizational infrastructure. This project has enjoyed a home in two such organizations: the Center for Policy Research and the Hispanic Research Center. At the Center for Policy Research this support was provided by Clara Shapiro, Executive Director; Sophie Sa, Administrator; Marcia Kroll, Administrator following Sophie Sa's tenure; Bess Shenton, Jeanne Allan and Audrey McGhie, Assistant Administrators; and Mindy Wexler-Marks who provided excellent word-processing capability. At the Hispanic Research Center, comparable support was provided by Elizabeth Ospina, Executive Coordinator, and by Mercedes Rivera, Elizabeth Collado, and Magdalena Porrata. Stasia Madrigal, the HRC's editor, assisted immeasurably in clarifying and focusing the written product of this series of projects. Kyonghee Min and Patricia Elwell, both of the HRC, assisted in the computer

programming tasks that converted several complex data sets into an interpretable entity. They did this with exceptional ability and dedication. Yvonne Martinez played an invaluable role by carrying through on several research tasks that continuously threatened to interrupt the progress of this study. Rosemary Santana Cooney assisted in a similar fashion, dealing with numerous issues that threatened to slow the study's progress. Others, too numerous to name, assisted at one time or another.

Having gratefully acknowledged the contributions of so large and diverse a set of individuals, it is nonetheless essential to point out that full responsibility for the accuracy and relevance of this study lies with the authors.

# 1

## CHILDREN IN FOSTER CARE: THE PROBLEM

In the United States an estimated one-half million children live separated from their biological parents in foster homes and institutions as wards of their respective states. Children in foster care come disproportionately from poor families. Partially as a result of this, minority children are also overrepresented. While these facts may imply serious family and child problems in the backgrounds of foster children and while a number have severe disabilities, the weight of evidence indicates that the vast majority are relatively normal: for the most part foster care serves children and families who need temporary assistance in working out individual or family problems. In a minority of cases foster care serves as a vehicle for child care during the process of seeking a new adoptive family. In either event foster care is officially intended to be, as a matter of public policy in most states, a brief interlude between permanent family environments (Mnookin, 1973). Nevertheless long-term foster care is a reality for very large numbers of foster children. This lack of a permanent family environment for children has become a focal point of concern -- a concern reflected in recent court cases, in system evaluations, and in service innovations in many parts of the United States.

This study reviews recent work -- both policy innovations and research -- which has focused on the factors which inhibit the attainment of permanent living arrangements for foster children. The monograph then goes on to report research and policy innovations for the New York City foster care system and that of the Southern Region of New Jersey's Division of Youth and Family Services. The study focuses on the identification of structural factors which can account for delays in the attainment of permanent living arrangements for minority foster children in particular, and which can be manipulated to significantly improve their prospects for family permanency.

It is not difficult to document the poor performance of foster care systems in restoring children to family life. This monograph provides some background on the matter and attempts to suggest plausible routes to improve performance in this area. However the issue is multidimensional. No one doubts that minority group children are less likely to return home or be adopted. Indeed, previous research and court testimony (described below) have consistently documented the fact that minority children, once they enter foster care, are less likely than White children to exit to permanent living arrangements. Those minority children who do exit remain in care longer before exiting. At issue is why this occurs. Are the causes to be found in the individual and family characteristics of minority children, or in the manner in which minority children are handled by child welfare systems?

Two themes, then, dominate this study. First, those factors which lead to poorer outcomes for minority children are sought for two different foster care systems. Second, the broader issue of what inhibits the swifter achievement of the goal of permanency for all foster

children comes under careful scrutiny. These themes are intertwined, but nevertheless distinct.

The investigation of those factors which inhibit the attainment of permanency and which create ethnic differentials in its attainment requires a structural or institutional perspective. This means that the roots of problems and their solutions are sought in the ways in which the various dimensions of child welfare services are legislated, organized and managed rather than in the individual characteristics of children or social workers. This perspective is developed in greater detail in Chapter 2, and receives further development in the remainder of this study. Nevertheless a few words of introduction to how this theme is handled seem appropriate.

This study utilizes a comparative perspective to identify those factors contributing to ethnic differentials in foster care outcomes. Several levels of comparison enable us to identify such factors. The empirical portion of this study begins with the examination of New York City's foster care system (Chapters 3 and 4). That system consists of a broad range of semi-private voluntary agencies and city agencies. The service activity typifying distinct sets of agencies varies considerably. This variation permits the analysis to progress towards the identification of organizationally based factors which contribute to ethnic differentials in the attainment of permanency. The study then goes on to report on foster care in New Jersey's Southern Region. New Jersey's foster care system does not consist of an array of distinct agencies. Rather it is a centralized state system which differs from New York City's along numerous dimensions. These differentials are outlined in detail in Chapter 2. New Jersey's distinctiveness has in addition been accentuated by its adoption of new permanency oriented structures and technologies. The before and after monitoring of these modifications permits a further series of comparisons. Some of these comparisons focus on different New Jersey district offices; and some compare the New York City system with that of New Jersey (Chapter 5). These comparisons shed considerable light on two basic queries: (1) What factors lead to slower or faster progress for minority children? and (2) What structural or institutional factors affect the overall attainment of the goals of permanency generally?

In the final chapter (Chapter 6) this study focuses on the implications of the comparative analysis. A guiding principle has been the recognized need to identify strategies of innovation which are plausible. Consequently we are concerned with more than proving an academic point. Rather the value of this study should be judged, in large part, by the practicability of the proposed changes. We regard it as important to distinguish between factors that are highly resistant to change, such as physical disability rates or residential segregation rates, and those that are more malleable or amenable to change by policy makers. Malleable factors, for instance, might include job design and task configurations at the operating level, or the terms of purchase-of-service contracts among agencies. Defining the problem in this way leads toward both analysis and solutions.

This overview is intended to assist the reader in gaining some initial perspective on the entire study. Nevertheless, the issues are complex and it is important to lay in the groundwork carefully. The remainder of this chapter provides some of the background essential to an analysis of foster care issues. Although the historical sections that follow give greater detail about how it developed, we start with a brief description of what foster care is and how it works within the context of United States social welfare services.

## WHAT IS FOSTER CARE?

Both informal and formal fostering arrangements have been made between parents and by tribes and communities from time immemorial. Such arrangements take varying forms in different cultures. Informal fostering arrangements continue to be made today in every part of the United States -- as for example when a child goes to live temporarily with a friend or relative while its mother is ill.

The formal system of foster care in the United States, while it may occasionally interact with informal arrangements, is nevertheless a highly organized, legally based institutional system created and maintained by government. Legally, the system is regarded as both mandated and justified by the developing legal doctrine of Parens Patriae. Under this doctrine it is considered obligatory for the state to intervene when the parent cannot or will not provide for the safety and welfare of the child, or when the child is orphaned or abandoned.

Highly evolved rules now govern such interventions for the protection of the child, and any subsequent placement of the child outside of the family. Procedural safeguards have been created with the aim of protecting both the rights of the child and the rights of the parent. But in general, the decisions concerning removal of a child from its home are made by an agent of the state who is usually called a social worker, and who works as the paid functionary of an agency. The agency may be a department of the county or municipal government, or it may be the county or city based suboffice of a department of the state government, or it may be a private (usually non-profit or voluntary) organization working under contract with the state or local government.

Children arrive in foster care by a number of routes. They may be brought to the agency's attention by their parents, by a relative or neighbor, by the police, by workers in another kind of agency, such as a hospital, mental health clinic, welfare office, or school. The children may have been abandoned, malnourished or abused, but many are neglected or in danger of being neglected by parents who are ill or who for other reasons cannot cope. Care is often requested voluntarily by parents, either because of a devastating family problem or because the child's own behavior or disability is beyond their abilities to handle. Sometimes it is requested involuntarily, under threat of legal proceedings for abuse or neglect, but recorded as voluntary; and sometimes it is accomplished by removing the child against the parents' will. Most states require later court review and approval of involuntary placement; some require it of voluntary placements, but such reviews may often be merely a "rubber stamp" proceeding (Mnookin, 1973).

For the most part in the United States, foster children are placed with foster or boarding families, i.e., with a parent or parents who have been recruited by and work under license and contract from the agency to provide care and parenting to the children placed with them. Some disabled children, and some teenagers --particularly those with acting-out problems associated with adolescence -- may be placed in group homes or institutional settings. But practice with regard to placement in "congregate facilities" and group homes varies considerably. New York, for example, has a much higher percentage than average of foster children in institutional settings. These placements include many who might be considered "inappropriately placed" because of their youth or other factors (see Bernstein, Meezan et al., 1975).

A number of studies (e.g., Fanshel and Shinn, 1978) have shown that a large plurality of children who enter care are returned to their parents in 1 to 24 months. For the most part such short-term cases require little social work intervention since the parents are usually already working hard to get their children back home. Fanshel and others have also shown that the chances of a child's exiting from foster care drops over time so that, after 24 months duration in care, for example, the chance of a child's returning home in some communities may be lower than 2 percent (Fanshel and Shinn, 1978).

Agencies may allow children to become long-term residents in foster care by neglecting to intervene when parents need and can benefit from assistance, by neglecting to take early steps toward adoption, or merely by failing to take appropriate steps and record the information early in a child's placement. Adoption supervisors in New Jersey have reported that merely the lack of early recording may require an adoption worker to spend an additional 6 to 18 months in casework and documentation required to free a child for adoption (Lehman, Smith, 1977).

However, in most instances the social work literature has indicated that there may be truly good reasons why long-term care is necessary for so many children and, except for the challenges to this assumption discussed below, common wisdom in the profession is that such children are for the most part in long-term care for appropriate reasons (Bernstein et al., 1975). Unfortunately, this common wisdom is at odds with public policy in most states (Mnookin, 1973) and may have long-term harmful effects on the mental health of such children.

## RELEVANCE TO MENTAL HEALTH AND PREVENTION OF MENTAL ILLNESS

Although not definitive, there is a considerable literature supporting the allegation that children inappropriately deprived of family life and kept in foster care and institutions for extended periods end up in mental health caseloads and in jails more frequently than those with more stable family histories.

A case from legislative testimony (E.P. Smith, 1975, 1981) may illustrate why inappropriately extended foster care can be harmful to minority children. This is the story of Joseph, a Black child who was surrendered by his mother at the age of five weeks and then spent twelve and a half years in foster care. According to the record, Joseph's mother thought she was surrendering him for adoption. However, the agency neglected to take a formal surrender from her at that time. The mother was lost track of and court proceedings were required to free Joseph for adoption when he was twelve years old. In the intervening years, Joseph was in five foster homes and an institution, and experienced two severe separation traumas; the first when he was eighteen months old, and the second when he was nine and a half years old. In each case, he was separated at a vulnerable age from the only mother he knew. After the first separation, the record shows that for two more years, pediatricians found him to be a "failure to thrive" child. After the second separation, at the age of nine and a half, the record shows that a series of three or four foster families found him so depressed that they could not deal with him and he was placed in an institution where he remained for two years until he was adopted. When he was adopted, it was found by his new parents that he had been labeled as "dull normal" when in fact he was learning-disabled and required eye training but was otherwise above average in intelligence. In addition, he had severe malocclusion and orthopedic problems. When all these problems were handled successfully, Joseph thrived physically. He received eye training and special schooling and went from a zero grade reading level to sixth grade reading level in three years. He will finish high school, two years late, but he will finish. However, these are the least of Joseph's problems. In spite of five and a half years of psychotherapy, he is reported as still suffering from an inability to relate to family members or other humans. He frequently evidences a lack of empathic facility and has a penchant for hurting others, especially girls, as a result of his seeming emotional callousness. The prognosis is that he will require several more years of psychotherapy and may even then not acquire the emotional capacity to operate responsibly as a parent.

Such cases are not atypical. There is long-standing evidence that removal from family and protracted foster care can be harmful to children. Almost two decades ago, a pioneering study by Maas and Engler (1959) demonstrated an association between placement in foster care and emotional disturbance. Fanshel (1971) provides evidence that the longer children remain in foster care, the more likely they are to become emotionally disturbed. (See also: Boehm, 1958; Bryce and Ehlert, 1971; DeFries, Jenkins and Williams, 1965; Eisenberg, 1972; Gil, 1974; Kaufman, 1970; and State Charities Aid Association, Child Adoption Service, 1960).

The psychiatric literature offers a theoretical basis for understanding the traumatic effects of foster care and particularly for the creation of psychopathic symptoms such as those displayed by Joseph above. Bowlby (1973, 1977), Anna Freud (1960) and Paul Steinhauer (1980) as well as Goldstein, Freud and Solnit (1973) all link emotional disturbance to children's separation from parents and particularly to the mismanagement and protracted extension of

such separations as evidenced in governmental programs for separated children in Britain, Canada and the United States. The failure of the subject children to accomplish grieving and rebonding processes has been particularly implicated by psychiatrists as a source of pathology among children for whom foster parenting is required (Steinhauer, 1980). That a pattern of family instability, alone or in combination with an experience of foster care, may act to increase the likelihood of later delinquency by the children discriminated against, is indicated by a recent study of the life histories of state prison inmates in five states (Gurak, 1977). This study showed that a very high proportion of convicts had as children experienced frequent changes in family placement, including much higher proportions in orphanages and foster care, than had comparable segments of the non-convict populations in the states studied. To the degree that these outcomes result from discriminatory patterns in the delivery of services, it may be argued that such discrimination may have the effect of disproportionately "programming" minority children for lives of crime.

## HISTORICAL ROOTS OF THE PROBLEM

Foster care did not exist per se in colonial America. The few orphaned and abandoned children not taken in by relatives were commonly farmed out to neighbors and, until they were economically productive, were supported by subsidies from the town councils. Current patterns of foster care are to some degree a return to this earlier system. But in the interim, child welfare travelled through a long period of bureaucratization and institutionalization, which began in the early 19th century with the creation of "asylums."

As described by David Rothman (1976) the asylum movement in the United States openly espoused the idea that congregate institutions are superior to the family for the children of the "dangerous" lower classes and of "mongrel" ethnic groups. They were intended to inculcate Puritanism and the Protestant work ethic in those children who had the misfortune to lose or be removed from their families. A parallel still exists, although not so puritanical in form, in many countries. In Mexico for example, hundreds of thousands of children are kept in institutions. As in the early days in the United States, these institutions are completely supported by the private donations of the rich. In most instances, parents are forbidden to have contact with their children more than once or twice a year. The children are raised completely by institutional personnel and graduate into the army, the police force, the petty bureaucracy and other institutional roles in society.

In the United States, however, such institutionalization of children was under attack from the earliest days. Successive waves of ethnic minorities in New York condemned institutions as devices for forcing children into the Protestant mold. The ethnic minorities of the times, the Irish and Italian Roman Catholics and the Jews, created alternative institutions for children of their own ethnic communities, as in New York City, or else participated in the creation of a non-sectarian public system as in New Jersey and other states.

Criticism of congregate institutions (1) as inappropriate, non-democratic, cruel, costly and detrimental for children continued throughout the 19th century. This culminated at the turn of the century when, under the influence of the Progressive Movement (Rothman, 1981), social services returned to a modified form of the colonial era practice of farming children out with families. Foster family care, paid for by governments, subsequently became the dominant substitute care pattern throughout most of the United States. In some areas such as New York City this meant that the asylums continued to run as part of the system of care, while foster families were recruited to accommodate the ever increasing overflow of homeless children. But in most areas of the United States, asylums were closed down or never started. Foster family placement became the dominant mode. However, the return to family care remained under the control of the bureaucracies that had run the asylums. In all areas, the philosophy, traditions and practices of the bureaucracies which administered foster care continued to reflect their inheritance from the asylum movement. Even while reforms of successive waves of progressives gave foster care an increasing role to play in the growing web of benevolent institutions -- which came to include family and juvenile courts, welfare aid to dependent

children, "protective" laws regarding abuse and neglect, and a growing army of social workers hired to carry on the new benevolence -- the tradition that held poor families in contempt and that considered the agency a superior parent remained prevalent (Rothman, 1981).

One of the most thorough reports documenting the need for reform in child welfare services is Children Without Homes, published by the Children's Defense Fund. CDF staff members studied publicly supported child care agencies in seven states to see how well they carried out their mandated responsibilities. In the words of CDF Director Marian Edelman, the report documents "a national disgrace -- a pattern of institutional abuse and neglect of our most vulnerable children" (Knitzer and Allen, 1978; 5). Highlights of the report's findings include the following passages in which the reader will note the degree to which this contemporary account describes agency practices that perpetuate the asylum tradition:

> At every point in the placement process children and their natural families are isolated from one another by the action and inaction of those with official responsibility. Pro-family rhetoric notwithstanding, a pervasive, implicit anti-family bias often shapes decisions about children at risk of removal or in out-of-home care.
>
> - The initial separation of child and family is often by default. Few alternatives such as homemakers, day care, specialized day treatment, alternative housing and other supportive services are available. Removing a child from home is often the easiest course. Funds for removal are available; adequate funds for alternatives are not.
>
> - Sometimes, in order to get appropriate educational or social services for handicapped children, parents are told they must place their children in out-of-home care. Sometimes, they are even told they must give up legal custody of their children.
>
> - When it is necessary to place a child out of the home, little thought typically is given to placement with familiar relatives. Sometimes states do not pay foster care rates to relatives, although they will to strangers. Yet without such assistance, relatives often cannot care for the children. This means that even when willing relatives are available, a child is likely to be totally uprooted and placed with strangers.
>
> - Typically, parents are not explicitly encouraged to maintain contact with their children. Sometimes they are actively discouraged from doing so. Only one-half of the reporting counties in our child welfare survey had specific written policies about parent-child visitation. One county reported it permitted such visits only on special occasions, such as the child's birthday. Another permitted visiting only in the courtroom, hardly a setting designed to put either the child or parent at ease.
>
> - Parents who want to maintain close contact with a child in placement get little help from local or state officials. Funds to pay transportation costs for visits are limited even though children are often placed long distances from their families. Parents are not routinely informed about the progress children are making. Sometimes they are not even informed when their children are moved. All this serves to reduce psychological ties and lessen the likelihood of reunification.
>
> - While the child is in out-of-home care, parents generally get little help with the problems that led to the removal. Funds for services that would enable the family to be reunited are seldom available.
>
> - There is far too little concern for the child's right to a family when initially removed from his or her own home, often before other alternatives are tried. Yet it is a tragic irony that once parental ties have been severed, either as a consequence of parental abandonment or the action or inaction of public systems,

legal termination of parental rights is rare. Regardless of the reality of the child's current situation or needs, there is widespread reluctance to initiate proceedings to terminate the rights of biological parents.

- For children who should have parental rights terminated or who have had parental rights terminated, efforts to ensure new permanent homes are often not vigorous enough. Adoption efforts are hampered by fiscal barriers, inadequate funds for subsidized adoptions or legal fees, as well as deeply embedded views that certain children -- minority children, older children, and children with special medical needs -- are "hard to place," and thus "unadoptable."

It must be stressed that foster care was used almost exclusively for placement of White children (including non-Puerto Rican Hispanic children) until the late 1930's. Hispanics were a tiny minority and Blacks represented a special excluded class for much of this history.

Prior to the Civil War, most Black children were "cared for" by the institutions of slavery. Even when homeless Black children were "freed" and brought North by the underground railway, they were often placed in almshouses or, if old enough, as indentured servants and apprentices, under terms far worse and more like slavery than was true of White indentured children. Black orphan asylums existed but were rare.

During Reconstruction, social services were developed for Blacks, only to fall to the racist and anti-populist budget-cutting of the post-Reconstruction Era. Traditionally, therefore, until after World War II, Black children were essentially excluded from services and were therefore an exotic rarity in the few foster care caseloads where they were welcomed. The homeless were instead, for the most part, taken in on an informal basis by relatives or friends in the Black community and escaped official recognition or attention.

Black children, and shortly thereafter, Puerto Rican children, began to enter foster care in significant numbers in the decades during and after World War II, as large numbers of minority families were forced off the land by the industrialization of agriculture. The institutions of the Black church and the Black extended family and Black self-help groups did not travel well or were inadequate to the task in the urban slums of the North, so that many minority farming families were forced into an isolated urban existence without their traditional networks of support. Puerto Ricans had similar experiences (Canino, Earley, Rogler, 1980). Perhaps, as a consequence, the non-White foster care population grew more rapidly after 1946 in the urban North than did the non-White population itself (Levitt, 1972). However, as reported by Levitt, Blacks especially were accommodated only with difficulty in the New York foster care system. In New Jersey, a completely State-administered foster care system, dating from 1899 (Hollender, 1970), while it had very thin resources for much of its existence, was less able legally to deny services to Black and Hispanic children. New York City, however, had no public agencies. As cited in Levitt, the Temporary Commission (1939) and the Welfare Council of New York City (1946), among others, had criticized the lack of resources for Blacks: for example, "only 11 out of 44 institutions accepted Negro neglected children" (Temporary Commission, 1939); "Public funds are in practice refused to this large group of children because there are no adequate programs developed for their care" (Welfare Council of New York, 1946).

It was specifically to provide service for such excluded minority children that the City and State created a New York City public foster family boarding home program in 1949 to "supplement" the voluntary programs that continued to operate with City funding. Now called Special Services for Children Direct Care units, the public agency was specifically designed not to compete with the voluntary foster care agencies, many of which continue to this day to be accused of "creaming" less difficult cases at intake, and of discrimination in their acceptance of children into care. (Nishi 1974; ACLU: Parker v Bernstein, 1980).

During the decades of human rights activism in the 1960's and 1970's foster care came in for its share of criticism and agitation from a loose coalition of professionals, foster and

adoptive parents and poverty rights activists. This history has been described elsewhere and a thorough review of the issues appears in Mnookin (1973).

In this study, we are concerned with a range of issues that is, by comparison, narrow, but which emerges quite clearly from the activism of the 70's. Thus, while we could focus on such questions as whether minority families have children punitively taken from them or whether minority children receive as good quality care as Whites while in foster care, we focus instead on the issue of whether equal care is taken to restore them to family life via return home or adoption. We focus on this and related issues because in fact this has been a key emphasis of reformers in recent years with respect to foster care for all children and not just minority children; because it is highly relevant in terms of potential for affecting mental illness rates for a significant population; and because it is the area of child welfare best documented and most accessible for comparative measurement.

In the New York and New Jersey systems, minority children constitute the majorities. However, in considering the role ethnicity may play in determining family restoration, one must not lose sight of the broader issue of the degree of adequacy (or inadequacy) of the various formal foster care systems in meeting the needs of children of all ethnic heritages. Ample evidence exists indicating that foster care systems are not functioning well in this broader sense (Knitzer and Allen, 1978). In this respect, the efforts of reform-minded innovators and researchers have produced some benchmark data against which to measure the performance of both the New York and the New Jersey systems, but the benchmarks have not heretofore been used to measure differential effects on Black and Hispanic children.

It may be that even when they appear to be treated discriminatorily, Black and Hispanic children may be more likely to be restored to family life by effective agencies than by agencies that are non-discriminatory but less effective. One might argue that remedying discrimination is less important than improving services to all children, since the latter accomplishes the former. This implies that discrimination against foster children per se is the most serious factor to be weighed. Since even Whites are treated inappropriately in many agencies, perhaps one should place the whole discussion in the context of discrimination against the poor and the disabled, as well as against Blacks and Hispanics. Nevertheless the possibility of the existence of structural processes which have a negative impact specifically on minorities needs to be addressed directly. Were such a pattern to be verified it would almost certainly suggest the need for reforms above and beyond those needed to raise the general quality of services.

The analysis reported in this monograph indicates that structural factors are operating in a manner that: (1) unnecessarily increases the duration of foster care for all children; and (2) exaggerates these negative tendencies for minority children. This does not mean that the existence of a deliberate policy of discrimination which results in minority children remaining in care inappropriately has been established. Discriminatory outcomes can result from both direct and indirect or structural causes. Direct discrimination occurs when an individual's racial or ethnic characteristics (or other characteristics) directly influence the decisions of those responsible for providing services or making evaluations. Even individuals who are not markedly prejudiced can discriminate in this way if they permit ethnic stereotypes to overrule objective indicators of case status and inappropriately alter case plans and actions. Indirect, or structural discrimination, occurs when organizational procedures influence case processing and members of various groups find themselves being differentially processed because of factors only secondarily related to ethnicity. In New York City, one example would be Blacks receiving poorer care if they are sent to a particular denominational agency because of their tendency to belong to that denomination. The poorer care would result from the organization of that denomination's agency. Blacks would end up there because of their religion and not, directly, because they were Black (2).

Structural discrimination, in its pure form, is more amenable to modification once its causes are understood. Given the motivation, structural factors which lead to discriminatory outcomes can be modified without the need to change personalities and motivational

structures of individuals. This structural perspective on the provisions of foster care services is developed in more detail in Chapter 2.

## CONCLUSION AND OVERVIEW

In this introductory chapter, it has been argued that the official goal of most United States foster care systems, that of rapid return or placement in a permanent family environment, provides a reasonable and valuable guideline for evaluating the adequacy of a foster care system. Long-term disruption of family arrangements greatly complicates the socialization process to the detriment of the child. Nevertheless, the attainment of this goal appears as out of reach as ever. Further, evidence suggests that permanency is an even more elusive goal for minority children in foster care.

The brief historical overview presented in this chapter indicates that the foster care system of the United States is a collection of ad hoc solutions to problems caused by social and economic change and by the evolution of standards concerning what is appropriate care for children. This evolution of diverse organizational systems and standards leads to the presumption that structural and organizational characteristics may be responsible, at least in part, for the poor overall progress in the attainment of the goal of permanency and for ethnic differentials in the environment affecting that goal. While this notion is not new, it has met with resistance from many practitioners. Consequently, we further develop the concept of structural sources of poor and differential performance in Chapter 2. Chapter 2 also provides a descriptive comparison of the two systems subjected to scrutiny in this study -- that of New York City and the Southern Region of New Jersey.

The chapters that follow Chapter 2 present the results of analysis focusing on those systems. Chapter 3 develops a basic framework for analyzing the extent to which ethnic differentials for foster children in New York City are due to the characteristics of children and families at the point they enter the system or to differences in the manner in which children are processed. That chapter also provides basic descriptive information for New York City. Chapter 4 executes the analysis developed in Chapter 3 and attempts to specify some of the structural patterns which contribute to ethnic differences in foster care outcomes. Chapter 5 focuses on several aspects of the foster care system in New Jersey. While the New Jersey system is already organizationally quite distinct from that of New York City, it is in the process of becoming even more different. Innovations in the foster care system of that state are discussed and the impact of these innovations for the goal of permanency and for ethnic differentials in outcomes is analyzed. Comparisons with the New York City system are made in terms of outcome differences and the extent to which such differences can be attributed to their distinct organization of structures. In Chapter 6 the various strands of this report are brought together in an effort to suggest the most cogent lines of manipulation available to policy makers who want to improve the quality of foster care.

# 2

## DETERMINANTS OF FOSTER CARE OUTCOMES: THE STRUCTURAL HYPOTHESIS

This monograph rests, in part, on a series of studies which have explored the hypothesis that a child's fate in foster care can be predicted on the basis of what agency or social service unit has planning responsibility for it. The significance of repeated findings to this effect since 1976 must be underlined, since prior to 1976, the research evidence seemed to point in the opposite direction.

Prior studies tended to support the supposition that a child's history in foster care is primarily determined by the combination of age, sex, disability and presenting family problems that here are called the child's "entry-level characteristics." For repeated correlations of foster care outcome with entry characteristics, see for example Fanshel (1971), Festinger (1975) or Shapiro (1976). These leave the impression that the social service agency has had little impact on the outcome for the child. In addition, related research such as the 22 studies summarized by Wood (1978) has tended to support this supposition since it repeatedly concludes that casework, the principal tool of social service agencies, is minimally effective with clients generally as well as in foster care. Bernstein and others, in testimony for the defense in the case of Child vs. Beame (425F. Supp. 194 S.D.N.Y. 1977), were able to claim without serious challenge that minority foster children's fates are largely controlled by other factors, such as "social pathology" among minority families, over which agencies have no control, rather than by social work practices that agencies do control.

It is only on the basis of more recent studies and demonstrations that the contrary case can be made. Cumulatively these lead to the conclusion that casework with foster children can vary in effectiveness both positively and negatively, in response to technological and organizational influences that are policy-malleable. The more significant of these studies should be summarized here:

Based on a 1974-75 study of the Oregon foster care system, the Regional Research Institute for Human Services (1976) found that for children under 12 years of age, "institutional barriers" accounted for 82 percent of the variance in permanency planning for children; for those 12 and over, they explained 57 percent of the variance. Significantly, the Oregon researchers found that if entry-level characteristics were held equal, plans for children were predictable purely on the basis of which county agency supervised the case. Thirty-nine percent of the variance overall was a function of the county in which the child was placed. To quote the author, "...the counties as a source of variance means that for reasons as yet unexplained there are systematic differences associated with counties (agencies) as geographic administrative units on the basis of which workers make their decisions" (Regional Research Institute, 1976; 6-10).

The further possibility that such systematic differences may exist not only between counties but between states was suggested in a 1976 Center for Policy Research study by one

of the present authors (Gurak, 1977). Based on the life histories of convicts in five state prison systems, this study showed that prisoners had experienced not only foster care to a disproportionate degree during their youth, but also wide variations in this and other respects between states. Variations in the foster care experience of minorities quite notably included the fact that New York is the only state of the five where Black convicts are more likely than Whites to have been in foster care.

The above studies suggest strongly that the policies and organization of the foster care and related social service and judicial systems themselves may be equally or more important in determining placement and outcomes for many children than are the attributes (entry characteristics) of the children and their families. In this respect, the Oregon researchers postulated that local community and worker attitudes form the principal barriers to more appropriate return home and adoption planning in some regions. However, subsequent studies, as well as the follow-up Oregon Project itself (see below), have tended to provide substantiation and elaboration of a more concrete "structural hypothesis," under which policy, structural and organizational factors rather than attitudes are seen as key determinants affecting plans and outcomes for children.

The first of these, the Alameda Project in California (Stein et al., 1978), retrained and provided continuing supervision to social workers in a special unit, who then used performance contracting and systems intervention techniques with selected clients (3). The impact on the county foster care population as a whole is not known, but the impact on the selected client population was a 79 percent success rate in moving foster children towards exit via return home or adoption.

The second, the Oregon Permanency Planning Project, was an attempt to improve services on the basis of conclusions reached in the earlier Oregon studies regarding barriers to permanency. The project was also successful with a high percentage of selected children, and had the impact of reducing the utilization of foster care in implementing counties by 30 percent in four years (Regional Research Institute, 1978).

The third, the New Jersey Permanency Services Project, two years later drew on the experience of the Alameda and Oregon Projects as well as its own pilot research findings (Lehman, Smith, 1977) and had the impact of reducing utilization in fully implementing counties by 35 to 50 percent in just 19 months (Smith, Gurak, Lehman, 1981).

Clearly such results challenge earlier assumptions that foster children and their families are afflicted with such intractable problems that nothing can be done to restore the children to family life. More important, however, is the fact that the New Jersey project further substantiated the structural hypothesis with respect to the effectiveness of children's services. The Alameda, Oregon and New Jersey projects all created new organizational and interorganizational arrangements to achieve their results. In Alameda and Oregon, however, the experimenters were more interested in practice issues and did not regard these structural changes as central. The New Jersey experimenters did. The earlier New Jersey pilot study had found clear evidence that structural and systems factors could influence outcomes for children. Therefore, the evaluation of the New Jersey demonstration project examined thoroughly the degree to which the reorganization of management, staff services and relationships affects productivity on behalf of children. As in the Oregon Project, workers received extensive training in the "state-of-the-art" technology of permanency processing, and were given new case management and recording procedures. However, some units in addition reorganized all services, restructured all caseworkers' jobs, changed case flows and altered their District Office organizational structures; others did not. Evaluation after 19 months found that training in the advanced methods, in the absence of structural and managerial changes, was only minimally effective; the quantum jump in productivity described above was found only where restructuring occurred. This strongly suggests that in Alameda and Oregon, too, the results may have been in part the unanticipated and therefore unmeasured effect of organizational as well as technological changes.

Since the results substantially support such a theory, it is important to consider what the "structural hypothesis" implies with respect to minority foster children.

First, as elaborated and tested in New Jersey, the structural theory holds that family restorative social services for foster children (and children at risk) are largely held to a primitive level or else are suppressed in organizations whose primary role is something else. Thus an organization that is set up to substitute for parents will not develop or will tend to frustrate the development of service technologies that would re-substitute the parent. An organization that views itself in the role of primarily protecting children from family abuse and neglect will similarly thwart development of social service technologies required to re-empower such families to care for their children. Since the roles of child protector and/or substitute parent dominate most social service organizations dealing with children, a new kind of specialized organization with a different goal is more likely to be able to develop the appropriate technologies and expertise. Independent adoption agencies for the "hard-to-place," such as the Spaulding network, are the best examples prior to 1976 of such specialized development. The Oregon and the Alameda County projects are examples of the efficacy of such specialized efforts when devoted to restoration as well as to adoption of foster children. The New Jersey project applied the same principles to effect a permanent reorganization of services for both foster children and children at risk, with the result that the preventive and family restorative/supportive missions now go hand-in-hand with the child-protective mission of the agency and are gradually eliminating the substitute-parent role. Foster care itself has been restructured to leave as much responsibility with the parents as possible, and has become an occassionally necessary but time- and stress-limited element in a continuum of family services.

Second, in speaking of structure under this theory, it should be clear that all layers of organization are implicated in the kind of effort sustained and its efficacy. For this purpose it is useful to separate organization layers, as we have in Appendix A, into three levels: (a) the operating level; (b) the supervisory level; and (c) the administrative and larger systems levels. When discussing structures under this theory, the primary building blocks are within the levels where one talks of the structure or configuration of tasks performed. Our early studies found that progressively better performance at the operating level was associated not with progressively more activity in the same configuration, but with progressively different configurations of social work tasks (see Appendix A). This led to the conclusion that there is in fact a developing technology associated with family restoration or permanency services which displaces rather than augments traditional casework. At higher levels of organization we found that administrative tasks performed were also differentiated in relation to the practice of this "permanency casework technology." In some units supervisors and management organized their tasks to be supportive of such practices, others were supportive of other (usually more traditional) goals and therefore of different kinds of performance. To demonstrate the difference, the permanency service project accomplished a reorganization of tasks at the operating or worker level, but this was sustained and effective only in counties where supervision, supporting systems, the flow of cases and related elements at other levels of the organization were also altered to support the changed configuration of work at the operating level. Workers apparently cannot consistently implement permanency casework training unless the whole agency system changes also.

Third, in addition to internal agency structures, the theory also holds that the structure of relationships with related outside organizations is a variable that has an impact on children and is largely malleable. A simple example will illustrate this: in order to change over to the new permanency and preventive services orientation in New Jersey, one District Office manager reported that one of the most difficult tasks he had was to convince the local mental health agency that it was not appropriate to place children in foster care for therapeutic purposes such as "they need distancing." In other words, he had to actively persuade another agency to change its policies and practices and support the new orientation of his agency. In contrast, passivity with respect to the roles of mental health, police, school, health, housing, and judicial agencies characterizes the less effective agencies in our studies. The necessity to restructure the roles of such agencies vis-a-vis the children and families served by one's own

agency, even it it means change in judicial standards and laws, is accepted by the more effective programs in both Oregon and New Jersey.

Finally, and most basically, it should be understood that structure as it is used here encompasses all relationships at any level with clients as well as with related agencies and community. This includes children, parents, foster parents, adoptive parents, neighbors, local church and community groups, and the media. The structure or configuration of such relationships may be profoundly different from agency unit to agency unit, primarily because it reflects the unit's structuring of goals and tasks performed in relation to clients and community. Two different configurations are illustrated in Appendix A, but many others are possible. Maintaining parental responsibility for elements of planning and care, even while the child is in state custody, is an example of a structured relationship that is the opposite of the customary assumption of all responsibility by the agency, and that can have a profound effect on the outcome for the child.

As it has been progressively validated, the structural hypothesis has important implications for the study of services to minority foster children, since it implies that discriminatory outcomes are also likely to be structurally determined and that this may happen at more than one level. Thus, for example:

1. Within an agency unit, task configurations may be structured differentially. Blacks, for instance, may receive less attention to locating their missing parents or in helping their parents deal with alcoholism, if applicable, than do Whites. And such differentials may be blatant or subtle. But differential treatment within any one agency is not the only way to achieve discriminatory outcomes, since;

2. Between agency units, but within the same agency system, differential effects may also result from placing minority children more frequently in less effective units than Whites, or vice versa. To accomplish this the larger system need only tolerate (or encourage) structural differences between agency units so as to create less effective units, and then tolerate (or encourage) differential placement by ethnic group.

Example #1 describes a directly discriminatory structuring of work tasks so as to deprive certain children of services available to others. As a matter of policy in the current era, no organization is likely to feel free to openly instruct workers to operate discriminatorily in such manner, so that one must look for such effects to be the product either of informal or "winked at" variances from policy, or of an absence of policies regarding the structure of services to be provided.

Example #2 describes a more subtle segregation pattern. In New Jersey, since placement agency is determined by geography, residential segregation of minority families does result in larger minority populations in some units. Our method permits us to test whether such units are consistently less effective. In New York, placement is not a function of geography, but of a more complex sorting process in which the child's entry characteristics are weighed by voluntary agency representatives who are permitted to be selective, and in which out-of-religion placement is avoided as a matter of principle under law. However, the research problem is the same. A consistent pattern of less effective service in more segregated units in New York, particularly if it creates a pattern of disciminatory outcomes more blatant than that created by residential segregation in New Jersey, would be prima facie evidence of a structure that is discriminatory in fact and that as a matter of policy can be altered to reduce the adverse effect on minority children and families.

In this respect, it is not only structural segregation due to sorting policies in New York that must be looked to as creating a discriminatory impact. As we have noted above, segregation may only have this effect if the larger system also permits variations in unit effectiveness to adversely affect the minority children so segregated. And this, in turn, is a function of how services are structured in the agencies. No method could fully measure the

structural variations possible in this respect, as they affect Black and Hispanic families. But the data we have gathered to date do enable us to assess the problem in terms of gross indicators, such as the presence or absence of permanency casework with bioparents, which can then be related to known structural differences for purposes of comparison, and from which inferences may be drawn regarding the structure of services at the operating level. The chapters that follow present some of our findings in this respect with regard to the New York City system, and then in comparison with the seven-county Southern Region in New Jersey.

## NEW YORK AND NEW JERSEY COMPARED

Some major differences have been mentioned in the historical sections above. Before proceeding to discuss actual performance of the two systems, it may be helpful to describe the major differences in structure in greater detail. The most obvious points of contrast between the two systems are: (1) the decentralization and autonomy of county, municipal and voluntary child welfare agency systems in New York, compared to the single, completely state-run system in New Jersey; and (2) the overwhelming reliance in New York City on the purchase, from non-profit voluntary agencies, of child care and other social services that are provided directly by government in New Jersey.

These obvious structural differences result from the historical development of child welfare and intergovernmental politics in the two states. To explain how such structural differences affect treatment of children, however, it is necessary to look first at the actual processing of families and children in relation to the structures created by each state at the operating level.

The basic organizational unit in New Jersey is the Division of Youth and Family Services (DYFS) District Office. There is one District Office in each county, except in the more populous areas such as Newark and Jersey City, where a number of Offices per county are located, each in relation to a different urban catchment area. Although there may be functionally specialized units within each DYFS District Office, the office itself encompasses a wide range of functions, including not only foster care but prevention, protection and in-home family services. The only important functional specialty which is organizationally separated is adoption. Adoption services are performed by adoption units operating out of each of four DYFS Regional Offices, and drawing cases from all District Offices.

In New York City, on the other hand, functionally disparate and more autonomous organizations operate with respect to varying child and family populations. The most numerous of these are non-profit voluntary agencies incorporated under state law as "authorized foster care agencies." These have foster care rather than family services as their chief function. There are almost 80 such voluntary agencies in New York City. Sometimes these are called adoption agencies since in fact many are chiefly known for processing adoptions. However, legally each must be organized as an "authorized foster care agency" to participate in State and City funding. In addition, the category of foster care agency includes New York's SSC (Special Services for Children) Direct Care units. These, while publicly operated, perform the same functions as the voluntary foster care agencies, and accept the children the voluntary agencies refuse to take. Approximately 15 percent of the foster children in New York City are cared for by SSC Direct Care.

Compared with the 35 District Offices in New Jersey, New York City, which has a larger population, has only five municipal SSC Field Offices, one in each borough. Functionally, these provide a much narrower range of primarily protection-oriented services. Because each serves a huge population, these offices are large and bureaucratic. Because they are chiefly engaged in protection investigations and services, they are primarily crisis-oriented. Not only are their workers trained to be critically aware of the harm done to children by families and caretakers, but the largest portion of their practice and experience is with families in which neglect and/or abuse are occurring, or which are in severe trouble. Children referred for foster care placement pass out of SSC Field Office caseloads, and

become the concern of a foster care agency. In such cases, a continuing Field Office relationship with the child and/or its family would be difficult to maintain due to the continuing press of crisis cases. In New Jersey, however, foster care cases continue to be served by the same office that provides protective and family services.

Functionally, therefore, a much wider range of clientele and activities characterize New Jersey's DYFS Offices. One example is in-home case work with families. Although slow to develop, such preventive and family supportive casework services have been mandated in New Jersey since 1951. In New York prevention has recently become a concern, but this has not led to an enlarged role for the SSC Field Offices. Instead, special legislation and funding have been required so that preventive services may now be purchased from a number of voluntary foster care and mental health agencies, with little reference to SSC Field operations. This division of roles affects the flow of clients in New York in an apparently dysfunctional manner, when compared with New Jersey. Even though they are part of a government bureaucracy, DYFS offices are better placed to provide family supportive and placement preventive services. This is so largely because they are smaller, relate to much less populous catchment areas, and provide a wider spectrum of services than any New York agency. At the same time, unlike the voluntaries, they do not have to go looking for cases, since these come naturally from the inflow of client families self-referred or referred by local school, police, health, welfare and day care authorities, who have long been used to working with the local DYFS office in their areas. That this may be a real lack in New York City can be seen from the fact that local Community Boards have recently secured a large foundation grant so that they may experiment with methods for integrating social services currently provided on an at-large basis by such agencies, so as to focus them better on needs in each neighborhood. (Foundation News, Nov-Dec 1981). In other words, the New York City structure makes it necessary to generate another bureaucracy just to create the interaction that occurs naturally in New Jersey.

It should be understood, however, that the New York structure does have some compensating features. In particular, it provides, on the operating level, a much richer array of services to children once they are taken into foster care. Some New York voluntaries are known internationally for pioneering in the development of psychiatric and residential treatment services for foster children. New York children are much more likely to receive the services of a social worker with a masters (MSW) degree. Our sampling shows ratios of 14 to 26 cases per social worker in the voluntary agencies, compared with ratios of 60 per worker in New Jersey. Historically, the social work literature regarding foster care practice has largely originated in New York. It would appear, however, that the high development of foster care practice there may have been at the expense of other social services. Relatively speaking, apart from foster care, other services which are relatively well developed in New Jersey remain underdeveloped, unconnected, inchoate and spotty in New York City.

One may suspect, therefore, that the very richness which has been bestowed on foster care in New York City may also be a stumbling block in the way of developing family supportive and restorative services. The latter must compete for resources with a very strongly entrenched tradition and system of organizations.

## THE POLITICAL CONTEXT: DIFFERENCES IN ALLOCATION PROCESSES

In New Jersey we see an organization that long ago abandoned foster care as its functional self-definition. When first studied in 1976, DYFS regarded foster children as a troubling, but nevertheless, minority portion of their clientele. As in New York, we found that, once a child was in foster care, service priorities and practices were still strongly influenced by the asylum and foster care traditions. But, unlike New York agencies, it had been a long time since the agency had considered foster care to be its reason for being. Most District Offices had developed general family practice models of organization; only a handful still had specialized foster care units. The superstructure of regional and state administration was similarly undifferentiated with respect to foster care; only adoption functions had a

specialized administrative structure. To a degree the re-structuring described in Chapter 5 introduced some further differentiation of functions, but the basic simplicity of organization remains.

In comparison, the supervisory and administrative structures of the New York Child Welfare system are almost byzantine in their complexity, their hierarchical levels of power and influence, their competing special interests and their rigidity. To a large extent this is the product of the fact that administrative and even legislative deliberations regarding child welfare in New York appear dominated by one overwhelming factor, the covert and sometimes overtly adversarial nature of the relationship between the voluntary foster care agency system and the public agencies that in theory purchase and supervise their services to children.

Lest readers outside of New York find this hard to understand, it should be noted that historically, before the development of government social welfare systems, the voluntary agencies represented both the efforts of the most charitable members of middle-class society and the self-help efforts of immigrant ethnic groups concerned with caring for orphaned and abandoned children of their own "landsmen." Many still have ethnic and religious communities they relate to, and this remains true even though the constituency may have dispersed to the suburbs. In addition, bishops and clergy may regard their denomination's agencies as part of the church's apparatus and property. And even though their own parishioners now rarely need foster care, the agency is still a source of employment for the denomination's clergy and religious and lay social workers. In the case of non-denominational and some denominational agencies, professional and upper-class benevolence is also still a major driving force.

As a consequence, it is not unusual to find on the Boards of Directors of these agencies not only bishops, psychiatrists, and professors of social work, but some of the richest and most powerful people in the State of New York. The owners and publishers of the New York Times, for example, have for generations provided board members to one or more foster care agencies. Other wealthy families have similar traditional relationships to these agencies. New York's array of wealth and power supporting foster care has no counterpart in New Jersey.

One should also note that, when created, most of these New York agencies did represent a set of needed social services and were related to an ethnically defined community which was not served by public agencies. Often the ethnic community was geographically bounded as well; and the agency was primarily responsive to the needs of the community of people that was also its constituency. As massive population shifts occurred, these agencies remain behind to provide foster care to a predominantly Black and Hispanic population, while their original constituencies are now served by predominantly public services in the suburbs.

The governing structures that remain behind can be quite powerful still, particularly when the voluntaries agree among themselves and band together. The voluntaries are represented by associations at two levels. Protestant and Jewish federations and Diocesan Catholic Charities organizations promote the interests of all but a few non-denominational agencies, and a Council of Voluntary Child Caring Agencies (COVCCA) represents the interests of all in relationships with City and State.

In New York City this has meant that child and family service priorities, funding, and innovation are largely set not by government administrators or legislators, but via the negotiation and renegotiation of contracts and agreements between the governments and the coalition represented by COVCCA. Reformers have successfully pushed for progressively more stringent laws to force voluntary foster care agencies to work for return home and adoption, rather than just keep the children in care. Minor success has also secured additional funding for preventive services by the voluntaries. But the basic structure of the system has not been challenged and the voluntaries' hegemony with respect to what happens to child and family service priorities is little understood, let alone questioned. Proposals in the 1950's to create a completely public system (Levitt, 1972) are now forgotten. This may be largely

because no critic considers the New York City and State governmental agencies capable of taking on the responsibility. New York City's SSC Direct Care, created in the 1950's to take children the voluntaries did not want, has continuously retained its reputation as the worst placement possibility for children, and our data confirm this. Criticism of SSC's negotiating, administration, and monitoring of foster care is mounting as represented by attacks from the offices of the City Council President and before that the Comptroller (Tobis, 1981; City of New York, 1977). Based on the available literature regarding New York City (e.g., Mayor's Task Force, 1980) and our conversations with a number of informants, we are unable to conclude that the city agency (SSC) has much power to effect changes in the outcome for the children.

The New York State Department of Social Services does currently appear to have power to influence some outcomes for children. The new Child Welfare Reform Act (CWRA) for the first time empowers the Commissioner of Social Services to apply sanctions against voluntary agencies. However, this Act was not operative at the time of our study and, indeed, the State is still "tooling up" to permit enforcement of it at this writing. In any case, when operative, the Act can only bring sanctions to bear against agencies that are judged as falling below certain minimum standards. The State Department of Social Services does not have the power to mandate restructuring of services, such as was accomplished in New Jersey. Its role is limited to accreditation, setting of those standards permitted under law, evaluation of services against those standards, and the imposition of penalties. The Department is prevented from straying further both by the legal checks and balances inherent in its political position vis-a-vis local governments and agencies and by the always present threat that the voluntaries will bring their considerable political clout to bear if they feel threatened. The state is similarly constrained with respect to the county Departments of Social Services in upstate New York. Even though the latter are public agencies, they are individually responsible to County legislatures and executives. The State has limited power under law to mandate change, and is particularly constrained with respect to policies against which both the voluntaries and the counties might unite.

The major differences between the two state political structures are highlighted if one compares their interaction in legislative and budgeting processes in each state. In New Jersey the Youth and Family Services budgets for the whole state go through one legislature; in New York many. In both states, Federal Title VI and XX funding sets certain mandates with regard to services; but in New York, local governments also provide funds, approve the services budgets, and are completely responsible for dictating staffing and organization of services and salaries. Local New York legislatures also determine appropriations for purchase of services from voluntaries. This means that political pressures and maneuvering during the State budget planning process in New York, come not only from the State executive bureaucracy and outside citizen groups, as in New Jersey, but also from local governments individually and in coalition, from the voluntary agencies, from denominational federations of agencies and from COVCCA. With respect to social services in New York City in particular, this process is even more complex because even before budgets are submitted, a lion's share of the City's social service allocation has already been determined by adding increments on top of commitments during contract negotiations with COVCCA. Generally speaking, therefore, in New York City new priorities are impossible without added budget money, the development of new budget lines for purchases of services, and state and local legislation to allocate the funds. This is the way a new emphasis on prevention has been created. On the other hand, even though it might be cheaper to accomplish such a change by reorganizing services and reallocating present resources rather than by creating new ones, this would be monumentally difficult in New York.

Not so in New Jersey. There, if legislation is required, only one administration and one legislature must be convinced. Voluntaries are few, their lobby weak, and local governments are not directly concerned. The result is that DYFS administrators appear to have far more power to alter operations, and to do so across the board, without negotiation and legislation. There are constraints, of course. Civil Service regulations mandate that certain conventions be adhered to, changes that cost money are not easy, and the bureaucrats dare not stray from legal mandates. But they do have the power to redesign caseworker's jobs, create special

units, reallocate staff, alter the protocols governing the flow of clients, reassign executives to new functions, create new controls, throw out old ones, and thus alter the delivery system in major respects without legislation. The head of a New York voluntary agency has similar powers, but only within a limited sphere. He cannot change practices in other agencies, or alter client flow patterns from others to his or adopt a new role in the community for which the City will not pay. Similarly the City or the State in New York cannot redesign worker's jobs, or demand that workers be reassigned from foster care to special units, or alter client flow patterns, without legislation and/or executive negotiations with COVCCA and a probably higher price tag. As described in Chapter 5, DYFS executives accomplished such changes, completely shifting the emphasis and effectiveness of the service delivery system at no added cost and without legislation. The change was most complete and was effective earliest where appropriate attention was given to "selling" and negotiating new structures with District Office managers; but obstacles were otherwise comparatively minor. In the long run, New Jersey units had none of the power to obstruct change that exists at every level in the New York system. There, the structure's checks and balances nullify efforts at change and create rigidity.

With respect to the New York City foster care system, clear evidence that such structural factors have a discriminatory effect would tend to support the allegations contained in recent American Civil Liberties Union litigation. However, we regard the content of the evidence, i.e., the structural patterns it illuminates, as having greater significance for those who must plan for these agencies in the future. The New York system has undergone waves of reform including the recent Child Welfare Reform Act, but the basic institutional structures have not changed, except for addition of new units, and subtraction of others, for generations. The structural hypothesis implies that if discrimination is found to be institutionalized in the current structure, it may only respond to a thoroughgoing restructure. This possibility is discussed in our concluding chapter.

# 3

## ENTRY, PROCESS, OUTCOME: ISSUES OF DATA AND METHODS

Conceptually and empirically, this study is rooted in several domains. On the conceptual level two lines of thought run throughout this monograph: (1) the extent to which ethnic differentials in outcomes are influenced by structural or organizational mechanisms and (2) the identification of realistic structural and procedural modifications in the provision of foster care services which might improve the well-documented problem of "drift" in foster care. Although these themes are discussed more fully elsewhere in this monograph, they are mentioned here because one would understand neither the data sources nor several of the measures without referring to them. This chapter briefly describes the three basic sources of data utilized in the analysis and introduces an analytical framework to guide the analysis. Working within this framework, we describe the principal measures, and include an explanation of the concepts being operationalized, as well as a description of the operationalization process itself. This chapter also presents basic descriptive information from the two New York City data sources, thus setting the stage for the multivariate analysis presented in Chapter 4.

While most measures utilized in the analysis are developed in this chapter, several are not, primarily because of their limited use. In addition, a few variables, especially those concerning New Jersey utilized in Chapter 5, differ in minor ways from those presented here. For these reasons and in an effort to encourage the reader to check the exact meaning of a measure, the reader is referred to Appendix B which provides a brief dictionary of variables utilized in this study. The dictionary is organized around the conceptual framework presented in this chapter. Because of the limitations of space within tables and the need to use numerous variables, we have adopted the convention of using capitalized titles for all variables used with any frequency in this analysis. Within the tables, variables will be identified only with these titles. In the text all variables will be described in more substantive terms; however the titles will be inserted in parentheses where further clarification is necessary. This will allow the reader to read the text more smoothly and to quickly reference a particular variable in either the tables or in the variable dictionary (Appendix B).

### THE DATA

Three sources of data are utilized in the empirical analysis presented in this report. Underlying all three sources is a common origin: all are some form of data coded from case records of various foster care agencies. The first source is the computerized data of the "Under-Care Module" of the Child Welfare Information Systems (CWIS) of New York City. The second consists of information coded, by a team of researchers under the direction of the authors, from a sample of cases that were in New York City's foster care system in mid-1979. The third source consists of data coded from the records of a sample of children in care, in 1979, in seven South New Jersey District Offices (counties) of New Jersey's Division of Youth

and Family Services (DYFS). The first two sources of data provide the principal material analyzed here. The New Jersey data give us the ability to formulate a comparative perspective. Those data are analyzed in Chapter 5. The New York data are analyzed in this chapter and in Chapter 4.

The basic unit of analysis for this study is a child who was in foster care during a specified period. In New York that period is June 1979 -- the date of the CWIS file which was used both as a sampling frame and as a source of part of the basic data. In New Jersey, data from two samples were collected. The first consisted of a random sample of 149 children whose cases were active for at least one day within the year beginning October 1, 1977 and ending October 1, 1978. This period preceded the introduction of the new case management system. The second sample consists of nearly 500 children whose cases were active for at least one day within the year beginning June 1979 and ending June 1980. Activity data for that period were collected, and milestone (progress towards exit) data for this sample were collected through December 1980.

Since the mid-1970's CWIS, which is primarily funded by New York City's Human Resources Administration, has been preparing computer files for the entire population of foster care cases in the New York City system. Currently, these files are updated on a monthly basis. The data-recording format of the CWIS record was developed and modified with the cooperation of a team of researchers at Columbia University's School of Social Work (Fanshel, 1976). Consequently, the data have proven superior to many other exemplars of organizational record data. The sources of the monthly CWIS data are forms which are filled out by the caseworker, or a supervisor if no caseworker is currently covering a case. While not everyone has been satisfied with this unavoidable procedure, CWIS has conducted data audits and has sought to improve the data collection formats in order to reduce ambiguity.

For the purposes of the present study, the existence of the CWIS data has been invaluable. Nevertheless, several key analytical goals could not have been achieved without supplementing those data with primary coding from case records. In particular, case activity process data fundamentally distinct from those recorded by CWIS were deemed essential. The June 1979 CWIS file of children in care in the New York City system provided the project with a listing of the population to be studied. Using that file we randomly selected, in the first sampling stage, 41 agencies. This was done to make the data collection process more manageable and less costly since teams of coders would be travelling to agencies throughout the city. Besides reducing the number of destinations, this step increased the average number of cases per agency thereby further increasing the efficiency of the data coding process. From the list of all children in care who were 16 years of age or less a computerized probability sampling procedure was utilized to produce a sample of 1235 cases. Ultimately all of the data on each of these CWIS records were merged with the data which was to be coded directly from the case record folder in the agency files.

The coding of records was begun in the early Fall of 1980 and completed during the subsequent winter. Bureaucratic delays in gaining access to the files resulted in extending the period of training of the coders. Consequently, those delays probably improved the quality of the data despite their overall inconvenience. Coding involved a detailed reading of a case file and the recording of specified information on structured forms. The first form was for the recording of basic background data which to a degree overlapped with CWIS data. These items included demographic data, disability status information, and a detailed listing of case plans up to June 1978. While the coding operation did record information covering the entire case history of a child, the project collected more detailed information for the period extending from June 1978 to May 1980. This period is referred to as the "experimental period." For a case's entire history, complete planning and placement histories were coded. For the experimental period data on each recorded activity were coded. These data provide the basis for the operationalization of measures such as the rate of permanency activity and the Milestone Rate.

The data from New Jersey were generated as a means of internally monitoring a new case recording and management system that was being put in place through the cooperative efforts of DYFS, the Edna McConnell Clark Foundation, and a group of researchers based at the Center for Policy Research (Smith, Lehman, and Gurak, 1978). That demonstration project evolved out of an earlier exploratory study in New Jersey which identified the components of case activity most appropriate for achieving the goals of permanency, and suggested the appropriate managerial technology for implementing and maintaining those procedures (Lehman and Smith, 1977). More will be presented on those procedures and their results in Chapter 5. A sample of 398 cases in foster care in the seven District Offices (the counties of Camden, Burlington, Salem, Atlantic, Cape May, Cumberland and Gloucester) which were participating in the demonstration project was selected. This was a sample of the files being generated by all cases in the system. The files consisted of three new forms that were filled out by the caseworker. The first sheet recorded basic demographic and case history information. The second consisted of one or more planning summary forms, detailing data such as current plans, timetables, and milestones toward exit actually completed. Finally, case activity logs, designed to replace the dictation system, were filled out, detailing information on activities and milestones.

It should be noted that all caseworkers in New Jersey were trained not only in terms of modification in activity, but also in recording procedures. After introducing the analytical model, the remainder of this chapter describes the operationalization of measures based on the New York data. The New York study was designed as a research project from the beginning and was funded accordingly. The New Jersey project was funded primarily as a demonstration project. Nevertheless, sufficient data were collected to permit a fairly detailed analysis. This introduction to the New Jersey project has been intended to acquaint the reader with the concrete roots of process measures such as the rate of permanency activity and milestones achieved. The coding procedures utilized to extract this type of information from the New York City agency case records evolved from the work being conducted in New Jersey. A more detailed examination of the New Jersey situation will be presented in Chapter 5.

## THE ANALYTIC FRAMEWORK

The central goal of the empirical segment of this study is the identification and specification of ethnic differentials in the processing of children in the New York foster care system. By identification we mean the determination of whether any ethnic differentials exist. By specification we mean how any such differentials have come into existence. We examine three ethnic groups: non-Hispanic Blacks (Blacks), Hispanics, and non-Hispanic Whites (Whites). While we pursue several lines of analysis, all of the factors examined can be thought of as belonging to one of three sets: background or entry-level factors, system processing factors, and outcome factors. Figure 1 provides an overview of the measures which belong in each of these levels. The remainder of this introduction will clarify the basic framework and introduce the constituent measures in more detail.

The major outcomes of importance to any youth in the foster care system are the probability of exit to a more normal and permanent living arrangement (essentially return home or adoption), the length of time the youth must spend in the system, and the rate of progress toward exit (milestones). Duration in care can be viewed from two perspectives: (1) longer duration reduces the amount of time spent in permanent family environments while growing up, and (2) longer duration in care reduces the probability of exit to a normal and permanent family living arrangement. Thus, the probability of exit is a function of the duration in care. Our first analytical question is: Are there differentials in outcomes for Blacks, Hispanics, and Whites?

Obviously, differences that emerge could be attributed to basic differences in the populations being served. Children enter foster care for different reasons. The family of origin situation may create special problems for either the return of a child or the process leading up to adoption. Factors such as the age of a child and his or her physical and

emotional health are also seen as affecting movement toward the option of adoption. The data in the files of New York City's foster care agencies permit these factors to be controlled to a certain extent since they contain information on child disabilities, age at entry, and family and child reasons for placement. They also contain data on the frequency of child contact with parents, and on the number of activities initiated by parents. These last two actually belong to the processing stage of the child-in-foster-care cycle; however, they can also be viewed as indicators of the coherency of the family of origin. To the extent that ethnic differences in outcomes exist independently of the influence of these entry or background factors, the analysis will establish the existence of differential processing of children by ethnicity.

Establishing the existence of processing differentials does not identify the actual processing mechanisms. Consequently, much of the analysis will seek to identify organizational factors associated with the indicated differentials. Processing (or structural) factors examined include: total case activity, the number of permanency casework activities recorded (activities directly related to return home or adoptive placement), and finally the agency placement process. Figure 1 charts entry, processing and outcome variable categories as they occur in relation to each other on the service continuum.

Logic, along with previous research (Lehman, Smith, 1977), indicates that much social work activity can occur for a given case without affecting the prospects of a successful outcome (exit or, more precisely, exit following a short duration in foster care accompanied by appropriate preparation for exit). Consequently, when looking at activities we focus on permanency activities though we do report data on total activity.

Agency placement requires a word of explanation. In Chapter 1 we described the complex structure and history of foster care agencies in New York City. Unlike states such as New Jersey which have centralized systems or county-based agencies which handle all foster care cases and provide a modicum of homogeneity of care, New York has 80 agencies consisting of extremely diverse organizational environments with extremely diverse performance records. Further discussion of this topic will be postponed until we have demonstrated the extent of the agency placement effect. Suffice it to say that assignment to agencies is not random and that the selectivity of placement operates against the interests of minorities in New York, albeit in a complex manner. This last point receives considerable attention in the next chapter.

Although they will be subjected to further investigation in the future, two other process factors will receive little attention in this monograph: (a) the history of placement activities and, (b) the quality and rate of change of planning goals. The first, placement, opens up a complex field of investigation which is not necessary for this monograph. The second is somewhat perplexing. A typical case experienced many changes in goals, and actual sequences of goals appeared uninterpretable. However, the introduction of controls for current or most recent goal (adoption, return home, or other) had no effect on the analysis reported in Chapter 4. This implies that the agency's goal for the child, at least as reported to CWIS and in case files, is not statistically related to the outcome for the child. However, more work is needed here; perhaps by researchers, perhaps by others.

## BASIC DESCRIPTION OF FOSTER CARE SAMPLE

Sixty-four percent of the 953 cases whose files we were able to analyze (4) were Black, 20 percent were Hispanic, and 16 percent were non-Hispanic White. This distribution clearly deviates from the ethnic composition of the city which, according to the 1980 census, is 52 percent non-Hispanic White, 24 percent Black, 20 percent Hispanic, and 4 percent other. The disparity in these distributions can be, in part, attributed to differences in age structure and socioeconomic conditions. Younger, higher fertility populations will have a higher proportion of their population in the childhood age range, and lower socioeconomic status populations are more likely to be served by a system such as foster care. A significant share of the overrepresentation of Blacks in the foster care population could be due to the higher

**Figure 1**

**The Analytic Framework and its Constituent Categories**

| Entry-Level Characteristics | Processing Factors | Outcomes |
|---|---|---|
| Family Reasons for Placement | Agency Placement Patterns | Duration in Care |
| Child Reasons for Placement | Casework Activity | Milestone Rate |
| Age at Time of Placement | Permanency Activity Rate | Exit via Return Home |
| Disability Status | Planning Goals | |
| Other Family Status Indicators | Placement Activity | Exit via Adoption |
| Ethnicity | | |
| Religion | | |

proportion of youth in that population and their poorer socioeconomic situation. However, the ethnic distribution of the foster care population does not approximate that of the population of children receiving public assistance in New York City. While 64 percent of the foster care sample are Black, only 38 percent of the public assistance population is Black (Dixon and Storter, 1981). Using the same comparison, Hispanics are underrepresented in foster care when compared to their representation in the public assistance population. These discrepancies could be due to several factors, for example, the actual familial situation of Hispanics may be better than that of Blacks; or Hispanics may offer more resistance to official interference in family affairs.

Since we lack reliable data on the above factors, including that of actual familial conditions in the population at large, we can only speculate on the causes of the disproportionately high number of Blacks and the disproportionately low number of Hispanics in foster care. Clearly, regardless of causes, we are talking about a system that deals principally with Black and Hispanic minorities: 84% of the children in our sample (of the population of all children in care who were 16 years of age or younger) were Black or Hispanic.

**Entry-Level Characteristics**

The sample of foster care children was drawn from the population of all children in care as of June 1979 (see Tables 1 and 2). On an average, they had been 5.45 years of age when they were placed in foster care and had been in care 5.22 years (Duration) as of June 1980 (or time of exit during the 12 month period prior to June 1980). Twenty-two percent had exited (Exit) during the 12 month period starting June 1979: 12.1 percent had returned home and 10.1 percent had been adopted. Almost 16 percent were classified as having a serious physical, learning, or socio-emotional disability (Serious Disability): 15.9 percent had a moderate or serious physical disability; 40.2 percent had a moderate or serious learning disability; and 45.8 percent, a moderate or serious socio-emotional disability.

Reasons for placement recorded in the files were diverse. For 91.5 percent of the cases, at least one family reason was given; and in 28 percent of the cases one child-related reason was recorded. Family reasons varied. In 7.4 percent of the cases placement resulted from parental death or surrender of child (Parent-Surrender). In 24.7 percent of the cases, placement was due to serious parental problems such as alcoholism, drug addiction, or confinement in jail or other institutions (Parent-Problem). The most common family reason might be considered the least problematic: 28.2 percent of the placement cases were due to inadequate housing or finances, parental or sibling conflict, or a stated inability to cope with current problems (Parent-Coping). In 12.7 percent of the cases, placement resulted from an emergency such as hospitalization or illness or from parental request (Parent-Request). Finally, in 10.6 percent of the cases, child neglect was listed as a reason for placement (Neglect). Neglect does not connote active abuse, but rather such behavior as the leaving of children unattended, or neglecting to provide for nutritional or health-care needs.

The assignment of precise meaning to each of these categories is not an obvious process. Logic, buttressed by consultations with knowledgeable caseworkers, indicates that parental problems represent the most important indication of serious familial disorder. This appears so because problems such as incarceration and addiction indicate major familial disruption which would inhibit return home without necessarily freeing the path toward adoption. At the other end of the spectrum, neglect, parental request and parental inability to cope with current problems usually reflect more temporary crises. Parental surrender should be a straightforward category in which condition of the family is a moot point because the child should be on an adoptive track.

Child reasons for placement are less common than family reasons. In 72 percent of the cases, no child reason for placement was given (No Child Reason). In 21.2 percent of the cases the child's school, home, or community behavior was cited as a contributing factor to placement (Other Child Reason). In another 6.7 percent of the cases a mental or physical

**Table 1**

**Entry-Level Characteristics (Means)**

**By Ethnicity: New York City[1]**

| | TOTAL SAMPLE | BLACKS | HISPANICS | WHITES |
|---|---|---|---|---|
| Black | .64 | ---- | ---- | ---- |
| Hispanic | .20 | ---- | ---- | ---- |
| White | .16 | ---- | ---- | ---- |
| Age at Placement | 5.35 | 5.07 | 5.41 | 6.43 |
| Serious Disability | .16 | .14 | .13 | .31 |
| Parent-Surrender | .07 | .10 | .04 | .04 |
| Parent-Problem | .25 | .29 | .17 | .18 |
| Parent-Coping | .28 | .26 | .34 | .30 |
| Parent-Request | .13 | .12 | .09 | .20 |
| Neglect | .11 | .09 | .18 | .07 |
| No Family Reason | .08 | .07 | .11 | .12 |
| Physical or Mental Child Reason | .07 | .04 | .08 | .15 |
| Other Child Reason | .21 | .22 | .16 | .25 |
| No Child Reason | .72 | .74 | .76 | .60 |
| Parent Initiative | .10 | .09 | .14 | .08 |
| Parent Contact | 3.03 | 2.54 | 3.86 | 3.93 |
| % Male | 55.8 | 54.6 | 60.7 | 54.6 |
| % w/Physical Disability[2] | 15.9 | 15.8 | 14.4 | 18.8 |
| % w/Learning Disability[2] | 40.2 | 37.9 | 42.8 | 46.3 |
| % with Socio-Emotional Disability[2] | 45.8 | 42.4 | 46.1 | 69.4 |
| % Catholic | 36.0 | 12.0 | 90.0 | 62.0 |
| % Protestant | 55.0 | 81.0 | 6.0 | 12.0 |
| % Jewish | 2.0 | 0.0 | 0.0 | 9.0 |
| % Other Religion or None | 7.0 | 7.0 | 4.0 | 17.0 |
| Number of Cases | 953 | 610 | 191 | 152 |

[1] Definitions of variables are given in the text. For a quick reference on variable definitions and/or abbreviations see Appendix B.

[2] Percent with moderate or serious disability.

problem of the child was listed as a contributing cause (Physical-Mental Child Reason). On the whole, child reasons for placement should indicate more malleable problems than serious family reasons since the absence of the latter means that return home may remain highly feasible. Of course, a child may have both family and child reasons for placement. Consequently, there is a need to control for both types of reasons for placement if we are to reduce the contribution of entry level factors on the observed outcome variables.

Up to this point we have described some of the background or entry factors of the sample of foster care cases. They point to a typical profile of non-infant entry into care with the prospect of a long stay in the system. They also indicate that while severe family problems and disabilities do contribute to placement, the majority of home environments may be amenable to improvement through the implementation of support programs. This last observation is, of course, inconsistent with the long duration of average foster care placements. Of more immediate interest is the issue of the extent to which there exist ethnic differences in these entry-level factors.

Clear ethnic differentials exist in all of the factors described in the preceding paragraphs. Blacks enter care at a younger average age than do either Hispanics or Whites (5.1, 5.4, and 6.4 years of age, respectively). Additional evidence of differential paths to entry is provided by the family reason variables. Serious parental problems (Parent-Problems) contribute to 28.5 percent of Black placements, but to only 17.2 percent and 18.4 percent of Hispanic or White placements, respectively. The more routine coping problems of parents (Parent-Coping) are associated with 34.0 percent of Hispanic placements, 30.2 percent of White and 25.9 percent of Black placements. Other notable results include the disproportionately high percentage of Black children who entered through parental surrender or death (9.5 percent versus 3.6 percent and 3.9 percent for Hispanics and Whites, respectively), and the disproportionately high percentage of Whites who entered due to parental request or temporary emergency or had no family reason. White children had a considerably higher incidence of serious disability than did children of either minority group.

Two aspects closely associated with system processing need to be mentioned here because they reflect family condition. These are the extent of parental contacts or visits with children and the number of permanency related activities initiated by parents. Parental contacts are measured from data in the caseworker reports to the CWIS system. We use the sum of such contacts in all settings. The average number of such contacts (Parent-Contact) is 3.03. It is, however, significantly lower for Blacks (2.54) than for Hispanics or Whites (3.86 and 3.93, respectively) (see Table 1).

Parental initiative (Parent-Initiative) was coded from case files by our research team. For every permanency casework activity, we determined whether the record indicates that the action was initiated by a parent, the social worker, or some other individual such as a supervisor or a judge. We interpret such initiative on the part of parents as a strong indicator of parental interest in the child (at least for those whose goal is return home). In general the records maintained by the caseworkers indicate low levels of parental initiative. In only 9.8 percent of the total cases were any permanency activities initiated by parents. Perhaps of greater interest is the fact that there is no significant difference between Whites and Blacks on this dimension (8.5 percent and 8.8 percent, respectively), but the Hispanic incidence of such initiatives is significantly higher with parental initiative having occurred in 14.1 percent of the cases.

Prior studies (Fanshel, 1975) have shown parental contacts or visiting to be a good predictor for the return home of the children. Our results confirm this. However, Fanshel's results are common currency in the field of foster care. Many agencies have made special efforts to encourage visiting, and visiting is very much subject to caseworker influence, therefore, we cannot regard parental contacts at the time of our study as a reliable indicator of differences in actual parental interest. Parent initiative as coded from the records was not subject to manipulation and we regard it as presenting a truer picture of unsolicited parental involvement in securing the return of their children. From this point of view, therefore, the equality of this measure for Blacks and Whites means that we cannot point to parental

**Table 2**
**Process Variables and Outcome Means for New York City**

| | TOTAL | BLACK | HISPANIC | WHITE |
|---|---|---|---|---|
| Permanency Rate | .26 | .25 | .32 | .33 |
| Permanency Activities | 5.69 | 5.34 | 6.95 | 5.51 |
| Total Activities | 22.07 | 22.27 | 21.81 | 21.58 |
| Total Activity Rate | 1.03 | 1.04 | .99 | 1.05 |
| High Exit Agency | .37 | .32 | .36 | .58 |
| Medium Exit Agency | .36 | .37 | .42 | .25 |
| Low Exit Agency | .27 | .31 | .22 | .17 |
| Duration (months) | 62.61 | 65.91 | 63.36 | 48.16 |
| Exit | .22 | .20 | .24 | .30 |
| Exit-Home | .12 | .10 | .14 | .18 |
| Exit-Adoption | .10 | .10 | .09 | .12 |
| Milestone Rate[1] | .027 | .026 | .023 | .034 |
| Number of Cases | 953 | 610 | 191 | 152 |

[1] Milestone Rate is given to three significant digits because of the low rate of activity.

initiative to account for the higher speed at which Whites were returned home, and there is reason to believe that this factor alone may account for the higher rate at which Hispanics returned home. The difference between Blacks and Whites in the parent contact measure must be attributed to some other factor, such as caseworker intervention, rather than to less interest on the part of Black parents.

**Outcomes**

What of ethnic differentials in outcomes? Overall, 22.3 percent of children in care as of May 1979 had exited (Exit) by June 1980 (Table 3). However only 20.0 percent of Blacks and 23.5 percent of Hispanics had exited compared with 30.2 percent of Whites. Whites had a slightly higher probability of exiting via adoption (Exit-Adoption). However the real differential is to be found in the probability of returning home: 10.0 percent of Blacks, 14.1 percent of Hispanics and 18.4 percent of Whites returned home (Exit-Home).

Not surprisingly, duration in care (Duration) is strongly related to ethnicity. Average duration in care for Whites was 48.2 months, while that of Blacks and Hispanics was 65.9 and 63.4 months, respectively. A milestone is an action that is always or usually accomplished prior to exiting. We identified up to nine milestones associated with return home (ranging from establishing return home as a plan goal to final discharge). Thirteen milestones associated with adoption were identified (ranging from plan establishment to legal adoption). For a precise explanation of milestones and Milestone Rate see Appendix B. The number of milestones toward exit achieved per month (Milestone Rate) also differed by ethnicity. The White rate of .034 is considerably greater than that of Blacks (.026) and Hispanics (.023). Perhaps more noteworthy is the small size of this rate for everyone (see Chapter 5). Clearly, significant ethnic differentials exist. The issue to be explored is whether these differences can be attributed to entry-level differences; and, if not, which of the systemic mechanisms contribute to the differentials.

In summary, it appears that Black children come from more disrupted family situations that do other children. It also appears that the problems facing the families of Hispanic children are more remediable. White children, it would appear, are more likely to be channeled into the system by parents and in a way that identifies characteristics of the children as key reasons for placement. Clearly, any analysis of differentials in outcomes will have to consider these entry differentials for they seem certain to affect the processing of children once in the system.

**Process Level Variables**

The process level variables include two measures of activity for each case, and three measures of type of agency placement. Case files are replete with accounts of activity. Recorded activities range from a call to confirm a date for a dentist's appointment to an appearance in court in relation to adoption proceedings. Two of these activity areas are summarized in Table 2. Much activity is supportive but unrelated to eventual exit. We focus on those activities associated with movement towards exit or permanent living arrangements. Activities of this type include both the steps in freeing a child for adoption and seeking placement and the activities explicitly targeted at modifying family or child conditions prior to return home. In most cases, these activities do not require contact with the child or custodial care of the child. Rather they require paper work and work with the family, the legal system, and related community agencies.

Table 2 indicates that during the two-year experimental period, the average number of total activities per case was 22.07. Case activity was similar for each of the three ethnic groups; however, it was highest for Blacks (22.27) and lowest for Whites (21.58). The level of activity directed at permanency was considerably lower: an average of 5.69 such activities was coded. In this area, Blacks showed the lowest level of activity (5.34) while Hispanics

showed the highest (6.95). Because there was considerable variation in the duration in care during the two-year experimental period (June 1978 - May 1980), a rate of permanency activity was computed (Permanency Rate). This rate is the number of permanency activities per month in care during the experimental period. The average rate of permanency activity is .265 per month. Blacks have the lowest rate (.248), while Whites have the highest rate (.326). The White rate surpasses the Hispanic rate because of the considerably shorter duration in care (overall and during the experimental period) experienced by Whites.

It should be noted that each of these measures suffers from a technical problem. We were unable to code data from 52 files which were sealed under law because the adoption had been finalized. For these cases we have only the CWIS data. Consequently, the actual permanency and milestone rates could not be determined. An arbitrary number of milestones, two, were assigned to each case. This is the minimum necessary to exit via adoption. Therefore, the relation of milestone rate to outcome variables will be either attenuated or unaffected. Not all adoption cases had reached the final milestone: 45 cases still had available files. Their average number of milestones was two; and their average number of permanency activities was 8.92. Consequently, we retained the theoretical estimate of two milestones as the assigned value and conservatively assigned eight permanency activities to the 52 sealed record adoption cases. These procedures, while arbitrary to a degree, appear well founded on empirical patterns.

As we shall see, much of a case's probability of exit and short duration in care is related to the agencies they are placed in. Consequently, a key element of case processing is the initial decision on placement. Agencies differ in terms of the efficiency with which they process their caseloads and their outcome patterns. They also differ in terms of the entry level characteristics of their caseloads. These latter differences are commonly understood to result from institutionalized sorting procedures at intake.

The study sample includes cases from 39 agencies (see Appendix D for a listing of sampled agencies). These include city (SSC), Catholic, Protestant, Jewish, and non-denominational agencies. Among these are some of the biggest and some of the smallest of the agencies which comprise the foster care system in New York City. Since we lacked sufficient cases to analyze each agency separately, we experimented with approaches to categorizing agencies. Initially, we used the schema presented above, that is, SSC, Catholic, etc. While this categorization produced clear patterns in relationship to outcome and process variables, there is almost as much diversity within each category as between them. Consequently, we decided to categorize agencies in terms of their exit rates. Those agencies with small numbers of cases in the sample were clustered in homogeneous categories. The resulting 22 categories were then trichotomized with eight being placed in the High Exit category and seven each in the Medium and Low Exit categories . The rationale for this was simple. Any element of subjectivity is remedied. Agencies are categorized on their record only. Any patterns of selectivity which emerge with regard to ethnicity or other factors will be a function of each agency's mode of operation as well as of the sorting mechanisms of the larger system.

The High Exit agencies include eight Catholic Agencies, six Jewish agencies, four non-denominational agencies, two Protestant agencies, and no SSC offices. From a caseload point of view, of the 353 cases in High Exit agencies, 36 percent were in Catholic agencies, 30 percent in non-denominational agencies, 27 percent in Protestant agencies, and 7 percent in Jewish agencies. The Medium Exit agencies include three Catholic agencies, three Protestant agencies, and one non-denominational agency. From a caseload point of view, of the 342 cases in these agencies, 63 percent were in Catholic agencies, 29 percent in Protestant agencies, and 8 percent in non-denominational agencies. The Low Exit category consists of seven SSC offices, four Protestant agencies, and one Catholic agency. Seventy-nine percent of the caseload in these agencies were in SSC offices, 13 percent in Protestant agencies, and 8 percent in Catholic agencies. The apparent tendency for High Exit agencies to have smaller caseloads appears misleading. Our sample data, which reflect total caseload size differentials of agencies, indicate that High Exit agencies are the smallest (17.5 cases per agency in our

sample); however, Low Exit agencies are also small with average sample sizes of 21.5. The Medium Exit agencies are dominated by larger institutions: the average sample size per agency is 48.8. We will discuss specific agency patterns in the concluding chapter.

Table 2 indicates agency placement is strongly related to ethnicity. Although only 37 percent of all cases are in High Exit agencies, 58 percent of Whites are in such agencies. Whites are underrepresented in the other two categories of agencies, while Hispanics are overrepresented in the Medium Exit agencies and Blacks in the Low Exit agencies.

Table 3 presents descriptive data on the composition and performance of each agency category. Clearly, as noted above, Whites are overrepresented in High Exit agencies, Hispanics in Medium Exit agencies and Blacks in Low Exit agencies. Other differences deserve comment. First there is the built-in ranking based on exit. Since exit was the ranking criteria, the order presents no surprises. The magnitude of the differences, however, should give pause for thought. The overall exit rate falls from .36 for the High to .05 for the Low Exit agencies. This pattern holds for both return home and adoption, but is more marked for adoption. Similarly, there is a parallel ranking for duration in care with a difference of almost two years less in care in High Exit versus Low Exit agencies. The Milestone Rate in High Exit agencies (.04) is 33 percent higher than that of Medium Exit agencies, and 400 percent higher than that of Low Exit agencies.

Further evidence of processing differentials among these categories of agencies is to be found from the indicators of activities. High Exit and Medium Exit agencies have similar levels of total activities and permanency activities (24.35 and 24.96, and 6.88 and 6.97, respectively). For Low Exit agencies these activity levels are quite low with an average of 15.12 total activities and 2.39 permanency activities. A similar picture emerges for the rate of permanency activity (Permanency Rate). The highest rate is the .33 permanency activities per month of the High Exit agencies; the lowest is the rate of .11 for the Low Exit agencies.

Other selectivity patterns also emerge from Table 3. High Exit agencies are more likely to have children who have child reasons for placement on their records. Their caseload also includes more cases with less serious family reasons for placement, and children in high exit agencies entered care when they were almost 1.3 years of age older than those in the other categories. While the percent with serious disabilities (18 percent) was not the lowest, neither was it the highest: that distinction goes to the Low Exit agencies (23 percent), but the spread, as can be seen, is not as large as might be predicted from the differences in exit rates.

In summary, the High Exit caseload appears to present the fewest problems to the processing agencies. This pattern does not, however, appear to account for their higher rates of exit. The older age at initial placement and high incidence of serious disability complicates any such simple conclusions.

## SUMMARY

This chapter, along with the variable dictionary located in Appendix B, introduces the data and measures which form the core of this analysis. While introducing the measures, basic descriptive statistics have been presented. That presentation clearly indicates that ethnic differentials exist at all three levels of our model. Blacks and Hispanics have poorer outcome profiles than Whites. They also have disadvantageous processing profiles. Their entry-level characteristics also differ, though it is not clear that those of White children are more advantageous. The next step involves the multivariate examinations of the determinants of outcome differentials. A detailed summary of the empirical findings of Chapters 3 and 4 is presented at the end of Chapter 4.

Table 3

Entry-Level Characteristics, Process Variables and Outcomes By Agency Category

New York City[1]

| | AGENCY CATEGORY | | |
|---|---|---|---|
| | HIGH EXIT | MEDIUM EXIT | LOW EXIT |
| Black | .56 | .66 | .74 |
| Hispanic | .20 | .23 | .16 |
| White | .24 | .11 | .10 |
| Age at Placement (in years) | 6.16 | 4.88 | 4.88 |
| Serious Disability | .18 | .10 | .23 |
| Parent-Surrender | .08 | .05 | .10 |
| Parent-Problem | .22 | .23 | .32 |
| Parent-Coping | .32 | .28 | .23 |
| Parent-Request | .15 | .12 | .10 |
| Neglect | .09 | .11 | .12 |
| No Child Reason | .66 | .78 | .72 |
| Parent Initiative | .09 | .13 | .06 |
| Parent Contact | 3.14 | 2.76 | 3.24 |
| Permanency Activities | 6.88 | 6.97 | 2.39 |
| Permanency Rate | .33 | .32 | .11 |
| Total Activities | 24.35 | 24.96 | 15.12 |
| Total Activity Rate | 1.16 | 1.16 | .68 |
| Milestone Rate | .04 | .03 | .01 |
| Exit | .36 | .20 | .05 |
| Exit-Home | .18 | .12 | .04 |
| Exit-Adoption | .18 | .08 | .01 |
| Duration (months) | 53.20 | 62.05 | 76.10 |
| Number of Cases | 353 | 342 | 258 |

[1] The three agency categories were formed by ranking the 39 agencies in our sample in terms of their case exit rate. This procedure is discussed in detail in the text.

# 4

## ETHNICITY AND FOSTER CARE OUTCOMES:

## THE PERSISTENCE OF DIFFERENTIALS

By now it should be clear that Whites, Blacks and Hispanics differ significantly not only in terms of their progress through the foster care system and their entry-level characteristics, but also in terms of processing factors such as the manner in which they are placed in agencies of vastly differing levels of efficiency, and the rate of permanency activity (Permanency Rate) they receive. All this serves only to introduce the core of the analytical problem. The three-level analytical model introduced in Chapter 3 is intended to emphasize the dynamic nature of the problem. Individuals enter the system with a given set of actual or perceived problems. These, in some fashion, influence their processing. The nature of their progress through the system and the ultimate outcome can be viewed as the sum of the impact of one's entry-level characteristics and the processing received while in the system. Consequently, neither processing nor outcomes can be examined without considering the impact of prior levels. In this chapter we examine how outcomes, in general, and ethnic differentials in outcomes, in particular, are influenced by the two preceding stages. To accomplish this, multivariate regression procedures are utilized. Readers who are unfamiliar with regression analysis should read Appendix C before proceeding. Other readers may wish to skim that appendix too; it explains many of the statistical conventions used in the analysis such as the use of differing levels of statistical significance and the consistent use of standardized coefficients in the tables even though unstandardized rates are, at times, reported in the text. Regardless of this level of statistical sophistication, we have attempted to describe the results of the analysis as simply as possible.

This chapter focuses on the situation in New York City. A comparative perspective will be provided in Chapter 5 when a briefer examination of the foster care system in New Jersey is presented. The New York data are better suited for exploring in detail each of the three levels of analysis. Consequently, they are subjected to a more extensive set of analytical procedures.

### ETHNIC DIFFERENTIALS IN OUTCOMES

Blacks and Hispanics remain in care for significantly longer periods than do White children (see Table 4). Blacks remain in care an average of 18 months longer than do Whites, while the differential between Hispanics and Whites is 15 months (unstandardized coefficients). The core analytical question is: To what extent is this differential due to group differences in entry-level factors? Column B of Table 4 indicates that controlling for entry-level factors does reduce the differential, but it remains large and significant: Blacks remain in care 9 months longer and Hispanics 13 months longer when the differences in family reasons, child reasons, disability, and parental initiative and contact are controlled (unstandardized coefficients).

**Table 4**

**Determinants of Duration in Care and Milestone Rate**

**Controlling for Ethnicity, Other Entry-Level Characteristics**

**and Process Variables**

**New York City[1,2]**

| | DURATION | | | MILESTONE RATE | | |
|---|---|---|---|---|---|---|
| | A | B | C | D | E | F |
| Black | .18[a] | .09[a] | .06 | -.09[b] | -.13[a] | -.08[c] |
| Hispanic | .13[a] | .11[a] | .08[b] | -.10[b] | -.14[a] | -.11[a] |
| Age at Placement | --- | -.40[a] | -.42[a] | --- | -.16[a] | -.17[a] |
| Serious Disability | --- | .08[a] | .04[c] | --- | -.12[a] | -.08[b] |
| Parent-Surrender | --- | .06[c] | .04 | --- | -.04 | -.03 |
| Parent-Problem | --- | -.07[c] | -.09[a] | --- | -.04 | -.03 |
| Parent-Coping | --- | -.14[a] | -.13a | --- | .02 | .00 |
| Parent-Request | --- | -.20[a] | -.20[a] | --- | .00 | -.01 |
| Neglect | --- | -.17[a] | -.18[a] | --- | -.02 | -.02 |
| No Child Reason | --- | .09[a] | .08[a] | --- | -.07[c] | -.06[c] |
| Parent Initiative | --- | -.16[a] | -.13[a] | --- | .14[a] | .08[c] |
| Parent Contact | --- | -.08[a] | -.11[a] | --- | -.10[a] | -.10[a] |
| Permanency Rate | --- | --- | -.16[a] | --- | --- | .21[a] |
| High Exit Agency | --- | --- | -.10[a] | --- | --- | .21[a] |
| Medium Exit Agency | --- | --- | -.09[a] | --- | --- | .09[a] |
| $R^2$ | .02[a] | .33[a] | .37[a] | .01[a] | .08[a] | .16[a] |

[1] Columns headed 'A' describe the regression of outcome variables on Ethnicity Variables alone. In Columns headed 'B', other Entry-Level Characteristics are added. In Columns headed 'C', process variables are added. Columns 'D', 'E', and 'F' follow this format.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

The introduction of process level variables (Table 4, Column C) causes ethnic differentials in the duration in care to decline further: to 6 months for Blacks (not statistically significant) and to 9 months for Hispanics (still significant). This indicates that these minorities stay in care longer despite all the controls applied, but that much of the differential in duration in care results from differentials in the factors under control of the foster care system. Thus, if we hold entry-level factors constant, Blacks and Hispanics continue to remain in care longer than do Whites. Controlling for process factors reduces but does not eliminate the minority groups' differential in duration, indicating that process factors such as agency placement and permanency activity do influence ethnic differentials. We will examine these process level factors in more detail below, but first other outcome factors must be examined.

The Milestone Rate provides a better, more direct indicator of one's progress through the foster care system than does duration in care. It will be remembered that the Milestone Rate indicates the number of important steps (or Milestones) towards exit achieved per month in care during the two-year experimental period. If important milestones associated with exit are being achieved at an appropriate pace, then differences in actual duration in care may be less significant. Columns D through F of Table 4 repeat the three equations just discussed for duration in care but with Milestone Rate as the dependent variable.

Blacks and Hispanics both experience lower Milestone Rates than do Whites (Column D, Table 4). This lower rate of progress cannot be attributed to their distinct entry-level characteristics since controlling for those characteristics only increases the differential between Blacks and Hispanics, on the one hand, and Whites on the other. The standardized coefficients increase from -.09 and -.10 to -.13 and -.14 when entry-level characteristics are controlled (Table 4, second column B). In simpler terms, if either Blacks or Hispanics had the entry-level characteristics of Whites they would be making even slower progress towards exiting than they actually are. Apparently this results from the fact that age at placement and the presence of serious disabilities are two of the more important factors influencing the Milestone Rate. They are negatively related to Milestone Rate and Whites have the higher average age at placement and a higher incidence of serious disability. Other factors also play a role. For example, Hispanics have a higher incidence of parent initiated activities than do Whites. Parental initiation of activities is positively related to Milestone Rate. Consequently, if Hispanics had the White level of parent initiated activities, their rate of progress through the system would be slower.

The addition of controls (Table 4, Column F) for type of agency placement and the rate of permanency activity changes this situation only marginally. Both High Exit agencies and Medium Exit agencies have faster rates of progress through the system (positive relationships with Milestone Rate of .21). Further, Blacks and Hispanics are underrepresented in High Exit agencies. Consequently, controlling for process variables does reduce the differentials between both Blacks and Hispanics and Whites. However, the resulting regression coefficients, -.08 and -.11, are essentially the same as those existing prior to controlling for entry-level characteristics. Controlling for the lower rate of permanency activity of minorities also acts to reduce the ethnic differential. Despite the importance of these process variables, important ethnic differentials in the Milestone Rate continue to exist when they are controlled. Such a result indicates that at least part of the slower rate of progress of Blacks and Hispanics must be due to yet more subtle processing differentials.

Because of the numerous events that can interfere with an actual exit from the foster care system, the Milestone Rate probably presents the best single indicator of successful outcome. Nevertheless, the underlying rationale for milestones is to be found in the concept of exit from the system. Table 5 presents an analysis of the determinants of exit from foster care.

Three variables measure exit outcomes. The first is a dichotomous variable which is coded '1' if the child left foster care via return home or adoption (Exit). The second, also a dichotomous variable, is coded '1' if the exit were via return home (Exit-Home). The third is

coded '1' if the exit were via adoption (Exit-Adoption). Each variable can be interpreted as the probability of a given type of exit during the 12 months following May 1979.

The probability of exit during that 12-month period was significantly lower for both Blacks and Hispanics than for Whites: 10 points and 7 points lower (unstandardized coefficients) respectively for Blacks and Hispanics. Controlling for entry-level factors (Table 5, Column B) actually increases the differential with Blacks 11 points and Hispanics 9 points less likely to exit than Whites when those factors are statistically equated. Controlling for process variables (Table 5, Column C) essentially reduces these ethnic differentials to zero. In this case the lower rate of permanency activity for Blacks and Hispanics and the disproportionate tendency for them to be placed in Low Exit agencies appear to be the principal determinants of their lower rate of exit.

Because both the activities necessary for bringing them about and their consequences differ markedly, we have disaggregated exit into its two components: return home and adoption. The results are similar with regard to ethnic differentials. Both minorities have significantly lower probabilities of returning home than do Whites. These differences persist when entry-level variables are controlled but disappear when process level variables are controlled (Table 5, Columns D through F). With regard to adoption (Table 5, Columns G through I) the minority deficit is statistically insignificant overall, but becomes significant when entry-level variables are controlled for. This indicates that Blacks and Hispanics should have been expected to have a higher rate of exit via adoption than they experienced given their profile of entry-level characteristics. In large part this would appear due to the fact that Blacks and Hispanics in foster care are younger than Whites and have lower rates of serious disabilities than Whites. Both of these factors generally would be expected to inhibit adoption for Whites, nevertheless the White adoption rate exceeds the minority rate. As in the previous cases, the introduction of process level control factors eliminates the ethnic differentials.

For all outcomes, Blacks and Hispanics suffer relative to Whites. The observed differentials cannot be attributed to entry-level factors, but rather appear to be due to process level differentials among the groups. In the case of Milestone Rates and duration in care, process controls act in the same way but do not eliminate the ethnic differentials. Before proceeding to examine these process factors, a word is needed on some of the entry-level controls.

We have argued that the entry-level control variables capture a good deal of the variance in the basic familial conditions. Nevertheless, the case records fail to provide adequate direct measures of actions aimed at remedying family and child problems when return home is the goal or for moving towards adoptions when that goal would seem appropriate. If one chooses to argue that entry-level variables fail to sufficiently capture ethnic differences of this type, it does not follow that agency records tend to understate the disabling familial and environmental factors for minority but not White clients. Regardless of their absolute degree of success in capturing variation in serious family and child problems, that set of measures appears more than adequate. Part of the reason for this is theoretical and part empirical. The theoretical rationale consists of the observations made in the first pages of Chapter 3. Some family reasons for placement indicate severe family problems (e.g., parental surrender) while others (parental inability to cope and neglect) indicate problems likely to be less fundamental in nature. Similarly, when placement results from a child-related reason, the implication is that family problems are of minor importance. Finally, a tendency for parents to initiate activity and to maintain contact with children indicates that family problems are being coped with (or at least that the motivation is there).

A glance at Column B (Duration) of Table 4 provides some empirical support to these deductions. Compared to having no reasons in the case file (indicative of casework neglect), Parent-Coping, Parent-Request and Neglect are negatively associated with duration in care. Parent-Problem is also negatively related to duration in care, however, its relation is weaker. Parent-Surrender shows a positive association, which is puzzling since the death of a parent or

**Table 5**

**Determinants of the Probability of Exit (Overall, Return Home, Adoption)**

**Controlling for Ethnicity, Other Entry-Level Characteristics and Process Variables: New York City[1,2]**

| | EXIT | | | EXIT-HOME | | | EXIT-ADOPTION | | |
|---|---|---|---|---|---|---|---|---|---|
| | A | B | C | D | E | F | G | H | I |
| Black | -.12[a] | -.13[a] | -.01 | -.14[a] | -.12[a] | -.02 | -.03 | -.09[b] | .01 |
| Hispanic | -.06[c] | -.08[b] | .02 | -.07[c] | -.07[c] | .01 | -.03 | -.07[c] | .02 |
| Age at Placement | --- | -.07[c] | -.09[b] | --- | .14[a] | .13[a] | --- | -.24[a] | -.25[a] |
| Serious Disability | --- | -.12[a] | -.04 | --- | -.05 | .00 | --- | -.11[a] | -.07[b] |
| Parent-Surrender | --- | -.05 | -.03 | --- | -.02 | -.01 | --- | -.04 | -.03 |
| Parent-Problem | --- | .00 | .02 | --- | .05 | .07[c] | --- | -.05 | -.04 |
| Parent-Coping | --- | .04 | .03 | --- | .05 | .04 | --- | -.00 | -.02 |
| Parent-Request | --- | .04 | .04 | --- | .13[a] | .13[a] | --- | -.08[b] | -.09[b] |
| Neglect | --- | .03 | .04 | --- | .07[c] | .08[c] | --- | -.04 | -.02 |
| No Child Reason | --- | -.10[a] | -.10[a] | --- | -.05 | -.02 | --- | -.09[b] | -.06[b] |
| Parent Initiative | --- | .06[c] | -.07[c] | --- | .14[a] | .12[a] | --- | -.08[b] | -.14[a] |
| Parent Contact | --- | -.01 | .00 | --- | .12[a] | .12[a] | --- | -.14[a] | -.09[a] |
| Permanency Rate | --- | --- | .09[a] | --- | --- | .05[c] | --- | --- | .07[b] |
| High Exit Agency | --- | --- | .32[a] | --- | --- | .16[a] | --- | --- | .27[a] |
| Medium Exit Agency | --- | --- | .13[a] | --- | --- | .08[b] | --- | --- | .09[b] |
| $R^2$ | .01[a] | .04[a] | .12[a] | .01[a] | .10[a] | .12[a] | .00 | .10[a] | .16[a] |

[1] In columns A, D, and G only ethnicity variables are determinants of outcome variables. In columns B, E, and H other entry-level characteristics are included. In columns C, F, and I process variables are included.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

**Table 6**

**Determinants of Agency Placement**

**New York City[1,2]**

| INDEPENDENT VARIABLES | DEPENDENT VARIABLES | | |
|---|---|---|---|
| | HIGH EXIT AGENCY | MEDIUM EXIT AGENCY | LOW EXIT AGENCY |
| Black | (-.24[a]) -.25[a] | (.10[a]) .15[a] | (.15[a]) .11[b] |
| Hispanic | (-.20[a]) -.15[a] | (.13[a]) .09[b] | (.07[a]) .06 |
| Age at Placement | .09[b] | -.02 | -.08[b] |
| Serious Disability | -.04 | -.10[a] | .15[a] |
| Parent-Surrender | .04 | -.12[a] | .09[b] |
| Parent-Problem | .02 | -.13[a] | .12[a] |
| Parent-Coping | .07 | -.08[c] | .02 |
| Parent-Request | .06 | -.07[c] | .02 |
| Neglect | -.00 | -.08[b] | .09[b] |
| No Child Reason | -.04 | .05 | -.01 |
| Parent Initiative | -.02 | .03 | -.04 |
| Parent Contact | -.01 | .06 | .05 |
| Protestant[1] | -.08 | -.08 | .16[a] |
| Catholic[1] | -.11[c] | .02 | .10[c] |
| Jewish[1] | -.01 | -.03 | .03 |
| $R^2$ | .06[a] | .05[a] | .07[a] |

[1] The deleted, or reference, religious category for religious identification is "no religion noted." Coefficients in parenthesis are those for the regression of agency variables on ethnicity with no other control variables included.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

the parental surrender of a child should facilitate exit through adoption. The inference is that this anomaly results from the delays associated with adoption in the city system. Having no child reason for placement extends duration in care as predicted. Conversely, Parent Initiative and Parent-Contact are negatively associated with duration in care as they should be if these variables reflect coping efforts of families. Further validation of these controls can be seen in Table 5. Parent-Request and Neglect, both indicators of transitory problems, are significantly and positively associated with the probability of returning home, as are Parent Initiative and Parent-Contact. All but Neglect remain signficantly, but negatively, associated with the probability of adoption as would be expected. Taken together with age at placement and the indication of serious disability, the set of family reasons, child reasons, and parental initiative and contact variables appear adequate, if not ideal, measures of problematic background conditions (5).

## RELATIONSHIP OF ETHNICITY TO PROCESSING FACTORS

Tables 2 and 3 in Chapter 3 clearly indicate a pattern of disproportionately large numbers of Whites in the High Exit agencies and disproportionately high numbers of Hispanics and Blacks in the Medium and Low Exit agencies. Still open to question is why this occurs. With the exception of the SSC offices, agencies actively select their caseloads. The selection activities operate in part through parental reference and in part through the efforts of agencies to secure cases with characteristics best suited to agency goals (such as perceived adoptability or need for specific therapy modalities). Consequently, agency success with regard to exit could be due, in part, to the selecting of the most promising cases as well as to differences in actual activity levels and types. Table 3 clearly indicates significant differences in activity levels, indicating that at least a significant proportion of the agency differences in outcomes results from differences in the internal operation of agencies. Nevertheless selective screening may still contribute to agency differences in outcome success (6).

Table 6 summarizes our analysis of selectivity by agency categories. Three equations predict the probability of placement in High Exit, Medium Exit and Low Exit agencies. Ethnicity and entry-level characteristics are utilized as predictors. If selectivity operates, it clearly should not be firmly based on ethnicity. That is, selectivity can be justified, if at all, only in terms of matching family and child problem profiles with agency strengths. The observed tendency for Blacks and Hispanics to be placed in less effective agencies and Whites into more effective agencies could have been due to their entry-level profiles. The results summarized in Table 6 indicate this not to be the case. Instead, placement into High Exit agencies remains strongly influenced by ethnicity after controlling for other entry-level factors. Blacks remain 24 points less likely than Whites to be placed in such agencies; the differential in probabilities for Hispanics versus Whites is 20 points.

Of the entry-level variables only age at placement and parental coping problems are significantly related to placement in a High Exit agency. Three indicators of religious identification were also included in these equations. Being identified as Catholic is negatively associated with placement in a High Exit agency. The other religious identification variables are also negative but statistically insignificant. More will be said about religious identification later in this chapter. For the present we merely note the relationships.

Placement in Medium Exit Agencies also remains strongly conditioned by ethnicity when other entry-level factors are controlled. In this case Blacks and Hispanics are 10 and 13 points, respectively, more likely than Whites to be placed in such agencies, controlling for other entry-level characteristics. For these agencies most of the other entry-level characteristics are weakly related to placement. These relationships indicate that children placed in the Medium Exit agencies are less likely than other children to have any family reason for placement. This can be interpreted as meaning that the average child in Medium Exit Agencies has fewer family and disability problems and should actually have a better prognosis for exit than those in other agencies. These statistical results may originate from

poorer record keeping; that is, workers in these Medium Exit Agencies may simply be less likely to record information in the case files. This does appear to be the case since in 78 percent of the cases no child reason was listed and in 13 percent of the cases no family reason was listed. This compares to 66 percent and 7 percent, respectively, for the High Exit Agencies, and 72 percent and 4 percent for the Low Exit Agencies. Furthermore, it was in the Medium Exit Agencies that a problem of misplaced files emerged. This apparent laxity in record keeping could create the impression that the entry-level characteristics of children in Medium Exit Agencies were less problematic than those of other cases, or one might argue that there is little difference. In any case, such laxity can be indicative of poorer processing procedures.

Placement in Low Exit Agencies also is strongly conditioned by ethnicity. Both Blacks and Hispanics are more likely than Whites to be placed here, controlling for other entry-level characteristics; while Blacks are considerably more likely than either Whites or Hispanics to end up in Low Exit agencies. Children placed here tend to be young, to have more serious disabilities and to come from families with more serious problems than those placed elsewhere (Note the relatively large coefficients for Serious Disability, Parent-Surrender and Parent-Problem in Table 6). The disproprotionate placement of Blacks and Hispanics here is above and beyond any tendency for them to possess such characteristics. Consequently, we see further evidence of an ethnic effect that may be produced through a labelling process.

Religious identification is unrelated to placement in Medium Exit Agencies, but positively associated with placement in Low Exit Agencies. Being identified as Protestant, especially, and Catholic are both significantly related to placement here. Only in this equation did the inclusion of the religion variables cause an ethnic coefficient to decline. The relationship between being Black and placement in a Low Exit Agency is .16 when the religious variables are omitted and .11 when they are included. This issue will be returned to at the end of this chapter.

Clearly, the tracking of placements is strongly influenced by ethnicity. This ethnic effect is not a function of group differences in entry-level characteristics since the differential pattern is quite strong when these characteristics are controlled. In addition the data indicate two other patterns. First, there is an automatic increase in the effectiveness of agencies in each category as one moves from the Low Exit to the High Exit Agencies. Second, the Low Exit Agencies clearly serve a caseload that presents greater entry-level problems to the agencies. Since the Low Exit agencies consist primarily of the SSC city agencies, they tend to get the cases not selected by the other agencies. That such a tracking pattern vis-a-vis case difficulty exists is well known. The fact that differential ethnic placement does not result from this tracking based on case difficulty is not well known. One final point needs to be made. Those agencies that are saddled with a more difficult caseload for systemic reasons clearly will have a more difficult time producing successful outcomes relative to other agencies. This, however, does not justify the lower levels of permanency activity that characterize these agencies. From an ethical point of view, one might have expected more rather than less activity in such cases.

The casework activity expended on a case influences the quality of outcomes and the pace at which they occur. In Chapter 3 it was noted that we are most concerned with activities aimed directly at moving children through the system rather than at maintaining them in the system. Table 2 demonstrates that Whites experience the highest rate of permanency activity and Blacks the lowest rate. In Table 7, we explore the extent to which these ethnic differentials in an important process persist when entry-level characteristics and other process variables are controlled. That permanency activity is important for outcomes has been demonstrated in Tables 4 through 6.

For the total sample, no ethnic differential in the permanency activity rate exists when entry-level characteristics and agency placement variables are controlled. The most important predictors of the number of permanency activities per month are placement in a High Exit agency or a Medium Exit agency or the incidence of parent initiated activity (Parent

Table 7

Determinants of Permanency Rate for Entire Sample and within Agency Categories[1]

| | TOTAL SAMPLE | HIGH EXIT AGENCY | MEDIUM EXIT AGENCY | LOW EXIT AGENCY |
|---|---|---|---|---|
| Black | -.02 | -.01 | -.07 | .02 |
| Hispanic | .01 | .05 | -.08 | .15[b] |
| Age at Placement | -.13[a] | -.18[a] | -.10[c] | -.06 |
| Serious Disability | -.08[a] | -.11[b] | -.09[c] | -.01 |
| Parent-Surrender | -.00 | .02 | -.01 | .00 |
| Parent-Problem | .02 | .00 | .03 | .01 |
| Parent-Coping | .08[b] | .00 | .06 | .14[c] |
| Parent-Request | .09[b] | .07 | .15[a] | -.04 |
| Neglect | .09[a] | .02 | .12[b] | .07 |
| No Child Reason | -.01 | .06 | .01 | -.01 |
| Parent Initiative | .38[a] | .24[a] | .48[a] | .50[a] |
| Parent Contact | .03 | .10[c] | .00 | -.01 |
| High Exit Agency | .26[a] | --- | --- | --- |
| Medium Exit Agency | .22[a] | --- | --- | --- |
| $R^2$ | .24[a] | .13[a] | .28[a] | .35[a] |

[1] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

**Table 8**

**Determinants of Outcome Variables within High Exit Agencies: New York City (N=353)[1,2]**

| | DURATION | EXIT | EXIT-HOME | EXIT-ADOPTION | MILESTONE RATE |
|---|---|---|---|---|---|
| Black | (.22[a]) .10[c] | (-.09) -.12[c] | (-.17[a]) -.08[c] | (.06) -.07 | (.01) -.08 |
| Hispanic | (.14[b]) .10[c] | (-.07) -.07 | (-.13[b]) -.09[c] | (.04) .00 | (.01) -.10[c] |
| Age at Placement | .41[a] | -.17[a] | .14[a] | -.35[a] | -.22[a] |
| Serious Disability | .01 | -12[b] | -.04 | -.11[b] | -.12[b] |
| Parent-Surrender | .12[b] | -.13[b] | -.05 | -.12[b] | -.13[b] |
| Parent-Problem | -.02 | .03 | .10 | -.06 | -.08 |
| Parent-Coping | -.08 | -.02 | .01 | -.04 | -.08 |
| Parent-Request | -.13[b] | -.00 | .13[b] | -.14 | -.07 |
| Neglect | -.10[c] | -.01 | .04 | -.05 | -.09 |
| No Child Reason | .08 | -.09 | -.04 | -.08 | -.03 |
| Parent Initiative | -.05 | -.03 | .06 | -.10[b] | -.01 |
| Parent Contact | .00 | .00 | .20[a] | -.20[a] | -.10[c] |
| Permanency Rate | -.19[a] | .07 | .07 | .01 | .12[b] |
| $R^2$ | .32[a] | .08[b] | .13[a] | .22[a] | .14[a] |

[1] Coefficients in parenthesis describe the regression of outcome variables as ethnic variables without the inclusion of control variables.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

Initiative). An examination of the determinants of the rate of permanency activity within each of the three agency efficiency categories yields a similar picture. The only significant differential is the indication that Hispanics experience a higher rate of permanency activity in the Low Exit agencies (coefficient .15). What accounts for this higher activity rate remains unknown. It does not appear to be due to the tendency for Hispanic parents to initiate more activities than other parents since that is controlled for. Nonetheless, one suspects that any differential in activity within this low activity environment is initiated by parents. One should recall that the permanency rate in Low Exit agencies is approximately one-third the rate found in other agencies (Table 3).

Table 7 clearly indicates that parental initiative exerts a strong influence on the rate of permanency activity experienced by a child. Parental initiation of activity is the most important predictor of the rate of permanency activity for the total sample and within each of the agency categories. Of greater significance than the average magnitude of this coefficient is the difference in magnitude for the different agency categories. Parental initiative is clearly a more important determinant of the rate of permanency activity in the Medium and Low Exit Agencies. The coefficient for the High Exit Agencies is .24 while that of the Low Exit Agencies is .50, or twice as great. In the High Exit Agencies, the frequency of parent-child contacts is also positively associated with the permanency activity rate. This may indicate that in a higher activity environment a closer relationship exists between family and agency. Regardless, the data summarized in Table 7 indicate that as the rate of activity and progress falls, the relative importance of parental initiative increases. Or, put differently, there is more activity in the higher exit agencies above and beyond that initiated by parents, and which can therefore be credited to the agency and its workers, while in the less productive agencies, whether or not a child exits is much more dependent on initiatives taken by his parents and much less can be ascribed to agency and worker effort.

## DETERMINANTS OF OUTCOMES WITHIN AGENCY TYPES

Having established the importance of agency placement in general for outcome and process differentials for Blacks, Hispanics and Whites, we next examine the determinants of outcome variables within each of the agency categories. Minority children do benefit in terms of experiencing shorter duration in care and higher probabilities of exit when they are placed in High Exit Agencies. Conversely, placement in Low Exit Agencies greatly reduces the prospects of exit or for a limited stay in foster care for all children. This agency pattern presents a problem that would need to be addressed even if there were no ethnic differentials in placement. As it is, Blacks and Hispanics are less likely than Whites to end up in High Exit Agencies and more likely to end up in Medium and Low Exit Agencies. For those who are placed in a High Exit agency, do ethnic differentials persist? Tables 8 through 10 examine the determinants of Duration, Exit, Return Home, Adoption and Milestone Rate within each of the three agency categories.

Black and Hispanic children who are fortunate enough to be placed in High Exit Agencies still experience a relative disadvantage compared to Whites. Blacks remain in care an average of 20.7 months longer than Whites; and Hispanics 16.3 months longer. After controlling for entry-level factors and the rate of permanency activity, these differentials reduce to 9.5 months and 10.7 months. A similar pattern emerges for the probability of exit, in general, and return home, in particular. Both Blacks and Hispanics are significantly less likely than Whites to return home after placement in High Exit Agencies. Controlling for entry-level factors and the permanency activity rate, the rather large differentials are reduced in magnitude but they persist. Blacks are 6 points and Hispanics 9 points less likely to return home than are Whites when these factors are controlled. The zero order differentials are 14 and 12 points respectively. No statistically significant differentials in adoption exist.

Within the High Exit Agencies being Black or Hispanic is negatively associated with the Milestone Rate. Controlling for entry-level factors and the permanency activity rate, the standardized regression coefficients are -.08 and -.10, or about the same as for the total

sample when process and entry-level factors are controlled. Only for Hispanics is this negative association statistically significant.

These results, when combined with those reported earlier indicate that the foster care system works against the interest of minority children in several stages. First, minority children are less likely to be placed in the more efficient agencies. Secondly, they make slower progress towards exit and are less likely to exit (especially home) than Whites even when they are placed in High Exit agencies.

We need to examine the determinants of outcomes within the other agency categories to fill in the processing picture. Within Medium Exit Agencies there are no statistically significant differences in duration, or any of the three exit variables between Black and White children. For Hispanics, however, several interesting patterns emerge. First, their average duration in care is significantly longer than that of Whites. Hispanic children stay in care an average of 17 months longer than do White children. Once entry-level characteristics are controlled, this differential increases to 21 months. Hispanics are also less likely to exit via adoption than are Whites in the Medium Exit Agencies. These two negative outcomes for Hispanic children are significant because it is in these agencies that Hispanic children are most likely to be placed. Balancing these results to a certain degree is the tendency for Hispanics to have a slightly higher probability of returning home than Whites after placement in Medium Exit Agencies. Once controls for entry-level characteristics are applied this differential declines to the point where it is not statistically significant.

Being Black or Hispanic means that the rate of progress towards exit (Milestone Rate) is slower than that of Whites in Medium Exit Agencies. Only for Hispanics is this relationship significant. The addition of controls for entry-level characteristics and the rate of permanency activity does not affect this pattern. Within Medium Exit Agencies there is a marked tendency for Hispanics to be processed more slowly than Whites.

Placement in a Low Exit Agency proves to be the great equalizer. With one exception, no substantively interesting or statistically significant ethnic differentials in the determinants of outcomes are to be found here. Placement in such agencies, which is a more common occurrence for Hispanics and, especially, Blacks, results in equally longer duration in care and equally lower activity levels and probabilities of exits for children of all three groups (Table 10). However, being Black or Hispanic is negatively associated with the Milestone Rate to an extent that strongly implies a slower rate of progress towards exit. However, for Hispanics statistical fluctuations and the smaller number of cases combine to reduce the level of significance of these coefficients to a point below the cut-off necessary for further elaboration (See Appendix C). Only for Blacks is this negative association significant.

One further distinguishing aspect of processing in the Low Exit Agencies deserves comment. Within the Low Exit Agencies parental initiative appears to be even more important in decreasing a child's duration in care than in the other categories of agencies. It is not, however, significantly related to exit. If one recalls the miniscule exit rates which exist in these agencies, then this finding appears less incongruous. Initiative by parents may not help in this situation. The strong negative relationship between parental initiative and duration in care in an environment where few exit may simply reflect a decrease in parental initiative as duration in care stretches out. This is only a guess, but one that fits the data better than others that come to mind.

One other point of view needs to be considered. It is only in the Low Exit Agencies that parental initiative is significantly associated with the Milestone Rate (.13). This indicates that despite the low exit rates in these agencies, activities initiated by parents are not necessarily futile exercises since they do serve to increase the pace of movement towards exit. It should also be noted that the rate of permanency activity is positively associated with the Milestone Rate in all three agency categories, but it is most strongly so associated in the Low Exit Agencies (.31), next most strongly in the Medium Exit Agencies (.19), and most weakly associated in the High Exit Agencies (.12). This pattern may mean that the measure of

**Table 9**

**Determinants of Outcome Variables within Medium Exit Agencies**

**New York City (N=342)[1,2]**

| | DURATION | EXIT | EXIT-HOME | EXIT-ADOPTION | MILESTONE RATE |
|---|---|---|---|---|---|
| Black | (.00) .09 | (.03) -.00 | (.09) .04 | (-.06) -.06 | (-.08) -.10 |
| Hispanic | (.15[b]) .19[a] | (.02) -.01 | (.13[c]) .08 | (-.12[c]) -.11[c] | (-.15[b]) -.16[b] |
| Age at Placement | -.33[a] | -.09 | .08 | -.22[a] | -.16[a] |
| Serious Disability | .04 | -.04 | -.04 | -.02 | -.02 |
| Parent-Surrender | -.11[b] | .07 | .02 | .08 | .05 |
| Parent-Problem | -.19[a] | .03 | .01 | .03 | .06 |
| Parent-Coping | -.25[a] | .11 | .14[b] | .00 | .08 |
| Parent-Request | -.28[a] | .10 | .20[a] | -.08 | .05 |
| Neglect | -.24[a] | .10[c] | .15[b] | -.02 | .06 |
| No Child Reason | .10[c] | -.12[b] | -.05 | -.10[c] | -.08 |
| Parent Initiative | -.10[b] | .11[b] | .25[a] | -.13[b] | .09 |
| Parent Contact | -.08[c] | -.03 | .03 | -.08 | -.12[b] |
| Permanency Rate | -.15[a] | .07 | -.01 | .11[c] | .19[a] |
| $R^2$ | .34[a] | .06[c] | .15[a] | .09[b] | .12[a] |

[1] Coefficients in parenthesis describe the regression of outcome variables on ethnic variables without the inclusion of control variables.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

permanency activity does a better job of capturing the diverse set of actions involved in the successful processing of cases in a very low activity environment than in a high activity environment. However, it may also suggest that the selection of "easier" cases at intake results in exits with less work on the part of the High Exit Agencies and/or that the latter return children home or place them for adoption with less preparatory casework than do the less successful agencies.

## DETERMINANTS OF OUTCOMES FOR RECENT ENTRANTS

A cross-sectional sample, such as that of children in foster care in mid-1979, provides a snapshot of a complex reality. Beyond the complexities already discussed, of major importance is the fact that such a sample will consist of both recent entrants and the residual of those who entered in the past. For example, the relatively small numbers of White children in foster care at present result both from the declining rate of entry of Whites and their higher probability of exit. While such a picture is valid, it must be manipulated in order to focus attention on the important issue of how the system is processing children who have entered it recently. Table 11 presents data on the determinants of outcomes for children who were in foster care for no more than 24 months by the time of their exit, or by May 1980 for those who did not exit. Table 12 provides parallel data for all children who were in foster care for more than 24 months. First some background data are needed.

For recent entrants into foster care, a relatively high exit rate exists. Thirty-six percent of the 256 children with stays of 24 or fewer months had exited by May 1980. Most (29 percent) returned home, though 7 percent were adopted. For some children, then, foster care is a short-term process. The average duration in care for all recent entrants was 14.9 months. For children in care longer than 24 months, the exit rate is 17 percent or less than one-half that of recent entrants. Not exiting early means an increase in the probability that one will remain in the system for an extended period. Among the long-term children, exit increasingly means adoption (11 percent), though some do return home (6 percent). The average duration in care for long-term children is 80.4 months (i.e., over 6.7 years). Progress toward exit is also slower for long-term children. Their Milestone Rate is .024 milestones per month as compared to .035 for the short-term children.

Among short-term children (Table 11), Blacks are less likely to exit than Whites or Hispanics. The negative relationship between exiting and being Black is strong and highly significant statistically. Controlling for entry level characteristics only increases the relationship (from -.19 to -.23). This means that the lower probability of exit for Blacks who entered recently is not a function of their entry-level characteristics. In Part B of Table 11 the ethnicity coefficients that result from the equation which includes both entry-level characteristics and process variables are presented along with the coefficients for the process variables. The coefficients for the entry-level characteristics are omitted to conserve space (they are essentially the same as those presented in Part A of the Table). The addition of the process variables does cause a significant reduction in the differential in the probability of exiting between Blacks and Whites (from -.23 to -.16), but it remains significantly large. Under all control conditions, no significant differential in the overall probability of exit exists between Hispanics and Whites.

For the two types of exit -- return home and adoption -- we see slightly different patterns for each ethnic group. Blacks are less likely than Whites to either return home or be adopted. In both cases, controlling entry-level characteristics actually strengthens this pattern. Controlling for process variables weakens the correlation between being Black and return home but has no effect on the strong negative association (-.18) between being Black and the probability of adoption. For Hispanics, no significant differential with Whites in the probability of returning home during the first 24 months in care exists. However, Hispanic children are less likely than White children to be adopted during this period. Controlling for entry-level characteristics only increases this relationship; and controlling for process variables has no effect on this differential. Being a Black or Hispanic child means that the

**Table 10**

**Determinants of Outcome Variables within Low Exit Agencies**

**New York City (N=258)[1,2]**

| | DURATION | EXIT | EXIT-HOME | EXIT-ADOPTION | MILESTONE RATE |
|---|---|---|---|---|---|
| Black | (.13) .04 | (.01) .01 | (-.02) -.00 | (.04) .03 | (-.10) -.14[c] |
| Hispanic | (-.09) .02 | (.13) .07 | ( .10) .08 | (.08) .01 | (.00) -.12 |
| Age at Placement | -.47[a] | .09 | .16[b] | -.09 | -.07 |
| Serious Disability | .09[c] | -.08 | -.09 | -.01 | -.08 |
| Parent-Surrender | .15[a] | -.08 | -.08 | -.01 | .01 |
| Parent-Problem | -.01 | -.04 | -.04 | -.02 | -.07 |
| Parent-Coping | -.02 | -.05 | -.11 | .12[c] | -.02 |
| Parent-Request | -.14[b] | -.07 | -.08 | .02 | -.04 |
| Neglect | -.14[b] | .05 | .02 | .06 | -.07 |
| No Child Reason | .08 | -.08 | -.11 | .04 | -.07 |
| Parent Initiative | -.15[a] | .03 | -.01 | .03 | .13[c] |
| Parent Contact | -.21[a] | .03 | .07 | -.06 | -.06 |
| Permanency Rate | -.10[c] | .13[c] | .03 | .22[a] | .31[a] |
| $R^2$ | .50[a] | .06[c] | .08[c] | .09[a] | .18[a] |

[1] Coefficients in parenthesis describe the regression of outcome variables on ethnic variables without the inclusion of control variables.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

**Table 11**

**Determinants of Outcomes for Children in Care Less than 25 Months: New York City (N=256)[1,2]**

| | EXIT | | EXIT-HOME | | EXIT-ADOPTION | | MILESTONE RATE | |
|---|---|---|---|---|---|---|---|---|
| A) WITHOUT PROCESS CONTROLS | | | | | | | | |
| Black | (-.19[a]) | -.23[a] | (-.11) | -.14[c] | (-.17[b]) | -.18[a] | (-.20[a]) | -.25[a] |
| Hispanic | (-.03) | -.07 | ( .03) | -.01 | (-.10[c]) | -.12[c] | (-.14[c]) | -.18[a] |
| Age at Placement | | -.07 | | .13[c] | | -.36[a] | | -.24[a] |
| Serious Disability | | -.04 | | -.02 | | -.04 | | -.09 |
| Parent-Surrender | | .02 | | -.01 | | .06 | | .01 |
| Parent-Problem | | .11 | | .10 | | .04 | | .10 |
| Parent-Coping | | .22[b] | | .10 | | .22[a] | | .10 |
| Parent-Request | | .17[c] | | .20[b] | | -.04 | | .09 |
| Neglect | | .10 | | .13 | | -.04 | | .01 |
| No Child Reason | | .09 | | .12 | | -.04 | | .05 |
| Parent Initiative | | .02 | | .10 | | -.13[a] | | .06 |
| Parent Contact | | -.02 | | .03 | | -.09 | | -.08 |
| $R^2$ | | .07[c] | | .07[c] | | .20[a] | | .15[a] |
| B) WITH PROCESS CONTROLS | | | | | | | | |
| Black | | -.16[b] | | -.07 | | -.18[a] | | -.20[a] |
| Hispanic | | -.01 | | .05 | | -.11[c] | | -.14[c] |
| Permanency Rate | | .06 | | .08 | | -.02 | | .10[c] |
| High Exit Agency | | .31[a] | | .31[a] | | .04 | | .20[b] |
| Medium Exit Agency | | .20[b] | | .18[b] | | .06 | | .12[c] |
| $R^2$ | | .12[a] | | .12[a] | | .20[a] | | .18[a] |

[1] In part B only the ethnic and process coefficients are shown, though equations were computed with all entry-level characteristics included. Coefficients in parenthesis are for the regression of outcomes on ethnicity alone.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

Table 12

**Determinants of Outcomes for Children in Care More than 24 Months: New York City (N=697)[1,2]**

| | EXIT | | EXIT-HOME | | EXIT-ADOPTION | | MILESTONE RATE | |
|---|---|---|---|---|---|---|---|---|
| **A) WITHOUT PROCESS CONTROLS** | | | | | | | | |
| Black | (-.04) | -.07 | (-.08[c]) | -.04 | (-.01) | -.05 | (-.01) | -.04 |
| Hispanic | (-.04) | -.06 | (-.05) | -.05 | (-.01) | -.04 | (-.05) | -.08[c] |
| Age at Placement | | -.14[a] | | .06 | | -.20[a] | | -.15[a] |
| Serious Disability | | -.16[a] | | -.08[b] | | -.13[a] | | -.12[a] |
| Parent-Surrender | | -.07[c] | | -.03 | | -.06 | | -.05 |
| Parent-Problem | | -.05 | | .03 | | -.07 | | -.09[c] |
| Parent-Coping | | -.04 | | .01 | | -.05 | | -.01 |
| Parent-Request | | -.02 | | .05 | | -.06 | | -.04 |
| Neglect | | -.02 | | -.01 | | -.02 | | -.06 |
| No Child Reason | | -.14[a] | | -.11[a] | | -.09[b] | | -.09[b] |
| Parent Initiative | | .03 | | .12[a] | | -.05 | | .15[a] |
| Parent Contact | | .01 | | .22[a] | | -.14[a] | | -.11[a] |
| $R^2$ | | .05[a] | | .10[a] | | .09[a] | | .08[a] |
| **B) WITH PROCESS CONTROLS[(1)]** | | | | | | | | |
| Black | | -.01 | | -.02 | | .00 | | -.01 |
| Hispanic | | -.04 | | -.05 | | -.01 | | -.08[c] |
| Permanency Rate | | .07[c] | | -.02 | | .11[a] | | .25[a] |
| High Exit Agency | | .33[a] | | .10[b] | | .32[a] | | .18[a] |
| Medium Exit Agency | | .11[b] | | .07[c] | | .08[c] | | .07 |
| $R^2$ | | .15[a] | | .11[a] | | .19[a] | | .18[a] |

[1] In part B only the ethnic and process coefficients are shown though the equations were computed with all entry-level characteristics included. Coefficients in parentheses are for the regression of outcomes in ethnicity alone.

[2] Superscripts refer to level of statistical significance (see Appendix C). An 'a' indicates significance at the .01 level; 'b', at the .05 level; and 'c' at the .10 level.

rate at which milestones toward exit are achieved is considerably lower than the rate for White children (Table 12). Controlling for entry-level characteristics only makes the relation more negative, indicating that slow progress does not result from case difficulty, but from other factors operating within the city's system of foster care agencies. Controlling for process variables weakens the negative relationship, but only to the point evidenced prior to controlling for entry-level characteristics (-.20 and -.14 for Blacks and Hispanics). Being in a High Exit or Medium Exit agency does mean that care will have a higher milestone rate. Similarly, the rate of permanency activity is positively associated with the Milestone Rate. Nevertheless, these process factors cannot adequately account for the lower rate of progress experienced by minority children. Consequently, the low rates for Blacks and Hispanics must be seen as resulting only in part from their disadvantageous placement pattern. Why a differential remains can only be guessed at. However, this analysis indicates it is not a result of entry-level characteristics.

Table 12 provides us with a picture of the determinants of exit for those children who were in care for more than 24 months. While the prospects for exit for children who have been in care this long are bleak, there does not appear to be any significant pattern of ethnic differentials. Blacks are less likely to return home than Whites (-.08), but this relationship becomes insignificant when entry-level characteristics are controlled. The only significant ethnic relationship when controls are utilized is the negative association between being Hispanic and the Milestone Rate (-.08). This relationship is not that large substantively. Nevertheless, process variables do influence outcomes. Placement in a High Exit agency remains strongly and positively related to Exit, Return Home, Adoption, and Milestone Rate. Placement in a Medium Exit agency is also positively related, though at a lower level, with each of the outcome measures with the exception of Milestone Rate. Permanency activity demonstrates a stronger positive impact on Adoption and the Milestone Rate among these long-term cases.

## RELIGION AND AGENCY PLACEMENT

Perhaps the most clearcut finding of this analysis is the finding that ethnic differentials in the process of placing children in agencies exist and that these differences work to the disadvantage of minority children. Because the New York system consists of a large set of religiously based voluntary associations, and because religion is consciously considered in the placement process, we would be remiss if we failed to examine the relationship of religion of individuals, religious base of agency, and placement outcomes.

Table 13 illustrates the strong relationship between individual's religious identification (as recorded in the CWIS file) and the denomination of agency of placement. That Catholics are consistently placed in Catholic Agencies is indicated by the positive correlation of .49 between individual Catholic identification and placement in a Catholic agency, as well as the negative correlations between that identification and any other type of placement. A similar situation obtains for Jewish placement in Jewish agencies. While Protestants also tend to be placed in Protestant agencies (r=.34), they are also more likely than those of other religious identifications to be placed in SSC and nondenominational agencies. Those for whom we have no religious identification were most likely to be placed in Catholic agencies and least likely to be placed in city agencies. The deviations from placement based purely on religion result from the lack of fit between the size of certain agencies and the religious composition of the population served (see Table 14-B). While 55 percent of the sample is Protestant, only 24 percent of the sample cases were placed in Protestant agencies. The sizes of the Jewish and Catholic case population match fairly closely with the Catholic and Jewish agencies' caseloads.

Despite the central role of religious identification in the agency placement process that identification plays a more modest direct role in determining whether a child ends up in a High, Medium or Low Exit Agency. Table 6 indicates that being identified as Catholic reduces the probability of placement in a High Exit Agency, and increases the probability of placement

**Table 13**

**Religion of Child and Agency Placement in New York City:**

**Zero-Order Correlations**

| DENOMINATION OF AGENCY | RELIGION OF CHILD | | | |
|---|---|---|---|---|
| | CATHOLIC | PROTESTANT | JEWISH | NONE/OTHER |
| Catholic Agency | .49 | -.53 | -.06 | .15 |
| Protestant Agency | -.31 | .34 | -.04 | -.05 |
| Jewish Agency | .02 | -.11 | .37 | .01 |
| Non-Denominational Agency | -.16 | .16 | -.04 | -.01 |
| City (SSC) Agency | -.13 | .19 | .00 | -.13 |

[1] All variables in this matrix are dichotomous -- one either belongs in a category (coded '1') or not (coded '0').

**Table 14**

**Religious Background of Agency and**

**Distribution of Agencies and Caseloads in New York City[1,2]**

| | HIGH EXIT AGENCY | MEDIUM EXIT AGENCY | LOW EXIT AGENCY | TOTALS N's |
|---|---|---|---|---|
| A. Agency Distribution: Number of agencies of a given denomination in each agency category. | | | | |
| Catholic Agency | 8 | 3 | 1 | 12 |
| Protestant Agency | 2 | 3 | 4 | 9 |
| Jewish Agency | 6 | - | - | 6 |
| Non-denominational Agency | 4 | 1 | - | 5 |
| City (SSC) | - | - | 7 | 7 |
| Totals | 20 | 7 | 12 | 39 |
| B. Caseload Distribution: Within agency categories (columns) and denominational categories (Rows).[2] | | | | |
| Catholic Agency | 35/36 | 59/63 | 6/8 | 366 (343)[1] |
| Protestant Agency | 41/27 | 44/29 | 15/13 | 227 (524) |
| Jewish Agency | 100/7 | 0/0 | 0/0 | 24 (14) |
| Non-denominational Agency | 80/30 | 20/8 | 0/0 | 133 (72) |
| City (SSC) | 0/0 | 0/0 | 100/79 | 203 (—) |
| Totals N's | 353 | 342 | 258 | 953 (953) |

[1] Figures in parenthesis are numbers of individuals identified as belonging to corresponding religious category.

[2] Figures to the left of the slash indicate the percent of each denominations foster caseload this is in either a High, Medium or Low Exit agency. These percentages add across to 100. Figures to the right of the slash indicate the percent of the caseload of the High, Medium and Low Exit agencies that is in each of the denominational categories. These add down to 100.

in a Low Exit Agency. The same pattern obtains for Protestants except that the relationship with placement in High Exit Agencies is not significant, and that with placement in Low Exit Agencies is significantly stronger. Perhaps of greatest interest is the observation that being identified as belonging to any of the three core religions increases one's chances of placement in a Low Exit Agency. Ethnicity is a considerably more important determinant of placement in High Exit Agencies than is religious identification. However, religion is slightly more important than ethnicity in its influence in placement in Low Exit Agencies.

The lesser impact of religious identification on placement into the three categories of agencies classified by exit rates as opposed to placement into agencies classified by denominational type results from the distribution of denominational agencies across High, Medium and Low Exit Agency categories. Table 14 demonstrates in terms of the distribution of agencies (Part A) and of agency caseloads (Part B) the general tendency for denominational agencies to be located in more than one category of agency. Eight of the twelve Catholic agencies in our sample are High Exit Agencies, three are in the Medium Exit category, and one is in the Low Exit category. The corresponding figures for Protestant agencies are: two, three and four. All Jewish agencies are in the High Exit category; all SSC offices are in the Low Exit category. Four of the five non-denominational agencies are High Exit agencies while the fifth is a Medium Exit agency. This distribution indicates that a relationship between the denomination of an agency and its exit efficiency does exist though it is far from perfect. Of the three religious denominations, Protestant agencies evidence the poorest exit performance, though the record of the SSC offices is considerably worse. It should be noted that the size of an agency is only weakly predictive of its exit efficiency. Large agencies are clustered in the Medium Exit category, while small agencies are disproportionately located in both the High and Low Exit categories.

Religion and ethnicity are strongly related (see Table 1). Ninety percent of Hispanic children in the sample are Catholic. Eighty-one percent of Black children are Protestant. While all Jewish children in the sample are White, 62 percent of White children are Catholics. Whites are considerably more likely than either Hispanics or Blacks to have no religon identified in their record. Religious identification is the factor primarily responsible for determining whether one is placed in an agency of a particular denomination, in a non-denominational agency or in an SSC agency. Ethnicity also has a net influence on this placement process. For example, being Hispanic is positively associated with placement in a Catholic agency whether a particular individual is Catholic or not. Being White is positively associated with placement in a Jewish agency whether an individual is Jewish or not. In general, the ethnic relationship is weaker than the religious one. The denominational character of an agency is related to whether one is placed in a High, Medium or Low Exit Agency (Table 14), but this relationship is weaker and less consistent than ethnicity's relationship. As indicated in the diagram there exists a direct influence of ethnicity on the placement process which results in Hispanics and Blacks being disproportionately located in Medium and, especially, Low Exit agencies. This direct path exists above and beyond the direct influence of the religious categorization of individuals. Religious identification also has a direct, though weaker, effect on this placement outcome. Both ethnicity and religious identification also operate indirectly through the complex sorting process which places individuals differentially in agencies of different denominational backgrounds or in non-denominational or city agencies (7). This indirect process is complex precisely because of the difficulty in specifying what factors are associated with placement in an efficient Catholic or Protestant agency as opposed to an inefficient Catholic or Protestant agency. More needs to be done to clarify this indirect placement process. Its mysteries, however, would have no practical significance if the processing of cases were more uniform throughout the system.

## SUMMARY OF RESULTS FOR NEW YORK CITY: CHAPTERS 3 AND 4

Chapters 3 and 4 present the results of the analysis of a data file on children in foster care in New York City. The data consist of a probability sample of all children in foster care in May 1979. Part of the actual data is the CWIS data from the May 1979 CWIS File; the other

part consists of data coded directly, by our staff, from the individual case files of the sampled children. The non-CWIS data provide information on activity and process factors as well as on outcomes up to June 1980.

The central goal of the analysis involves the determination of: (1) whether ethnic differentials in outcomes exist; (2) whether any such differences can be attributed to ethnic differentials in entry-level characteristics; and (3) whether any such differences which may remain subsequent to controlling for entry-level characteristics can be accounted for by process-level characteristics of the foster care system. The results of the analysis, briefly summarized, clearly indicate: (1) that ethnic differentials in outcomes do exist; (2) that these outcome differences cannot be explained by group differences in entry-level characteristics; and (3) that several process-level factors clearly contribute to these ethnic differentials. Since the analysis involves numerous measures and levels of analysis and several sets of key findings, the major results are summarized here in the form of a briefly annotated list. Some of the descriptive data from Chapter 3 are incorporated into this summary.

**Differences in Entry-Level Characteristics**

Each ethnic group presents a distinct profile of entry-level characteristics. White children enter at older ages, have a higher incidence of serious disabilities, are more likely to have a child-reason for placement and to have been placed as a result of parental request. Black children, while similar to Hispanic children in terms of age at entry and disability levels, are more likely than other children to have been placed in foster care as a result of very serious family disruptions. Hispanic children are considerably more likely to be placed in care because of short-run coping problems including neglectful supervision. The Hispanic child's family initiates considerably more activity within the foster care process than do either Black or White families.

**Differences in Outcomes**

Black and Hispanic children remain in care for significantly longer periods than do White children. They were also less likely to exit from the system during the experimental period. Blacks' average duration in care is 18 months longer than Whites, and that for Hispanics exceeds White duration in care by 15 months. Minority exit rates are between 65 and 70 percent lower than the White exit rate with the difference greatest for the return-home track. The rate of progress towards exit of minority children (Milestone Rate) is more than 25 percent slower than that of White children.

**Outcome Differences Controlling for Entry-Level Characteristics**

Although Whites, Blacks, and Hispanics differ in their entry-level characteristics, those differences do not explain the outcome differentials. The differentials in duration in care are reduced when entry-level characteristics are controlled. However, group differences in the probability of returning home are unchanged when those entry-level characteristics are controlled. The small zero-order differences in the probability of being adopted actually increase to significant magnitudes when entry-level characteristics are controlled. White children, despite their higher incidence of serious disability and older age of placement, have a slightly higher probability of adoption. If minority children had the same disadvantageous entry-level profile as do White children, their probability of adoption would be lower still.

Minority children's progress towards exit is significantly slower than that of Whites. Their rate of achieving concrete milestones toward exit is considerably lower than the White rate. Controlling for entry-level characteristics only increases the differential. This means that the slower minority rate of progress cannot be attributed directly to their

disadvantageous characteristics for if their characteristics where those of White children their rates of progress would be even worse than they are.

### The Role of Process-Level Factors in the Creation of Outcome Differentials

Black and Hispanic children, on the one hand, and White children on the other, differ in the manner in which they are processed through the foster care system. Minority children are less likely to be placed in agencies that have high activity rates and relatively superior outcome records. This differential in placement cannot be explained through reference to differences in entry-level characteristics. The High Exit agencies do succeed in getting caseloads that are better suited to successful processing. Their disproportionately low representation of Black and Hispanic children, however, is unrelated to entry-level characteristics. That is, controlling for such characteristics does not change the basic tracking pattern -- that of Black and Hispanic underrepresentation in High Exit agencies and overrepresentation in Medium and Low Exit agencies. Blacks and Hispanics also experience lower levels of permanency activity; however, these differences appear to be largely a function of the agency placement patterns.

These differences in process-level factors do explain much of the group differences in outcomes. Controlling for the differential placement pattern and rate of permanency activity eliminates differences in the probabilities of return home and adoption. While such controls reduce the group differences in duration in care, differentials persist. Taking the control procedure one step further, group differences in the rate of progress towards exit persist when controls for agency placement and permanency activity are introduced. Consequently, while process-level factors contribute strongly to ethnic differentials in outcomes, other unmeasured factors also contribute to those differentials.

### Outcome Differentials Within Agency Categories

Although any child, minority or not, benefits from placement in a High Exit Agency, significant ethnic differentials do exist within High Exit and Medium Exit Agencies. Black children experience a longer duration in care than White children in the High Exit Agencies. Hispanic children remain in care longer than White children in both the High Exit and the Medium Exit Agencies. These differences remain significant when entry-level factors are controlled. Both Black and Hispanic children experience a markedly lower probability of returning home than do White children in the High Exit agencies. These differences persist when entry-level characteristics are controlled. Within the Medium Exit Agencies, Hispanics experience a lower probability of adoption than Whites, but a higher probability of returning home. Controlling for entry-level characteristics, the former relationship remains significant while the latter does not. In Low Exit Agencies equality by ethnicity is achieved. No significant ethnic differentials exist in this environment of very long duration in care and very low probability of exiting or of moving towards exit.

Progress towards exit (Milestone Rate) is slower for Blacks and Hispanics in High Exit Agencies than it is for Whites. Within the Medium Exit Agencies, the same pattern obtains, however it is significant only for Hispanics. In the Low Exit Agencies both groups appear to experience slower progress, but neither coefficient is significant. All of the significant differentials remain significant when entry-level characteristics and the rate of permanency activity are controlled.

### Outcome Differentials for Recent Entrants to the Foster Care System

The probability of exit is strongly related to duration in care. Those children who do not exit shortly after entering care have considerably lower probabilities of exit to permanent family situations than do those who are successfully processed during the first year or two in

care. Consequently, it is extremely important to examine outcomes and their determinants for those children who have entered care relatively recently. This analysis examines those who were in care for 24 or fewer months and those who were in care for more than 24 months. Among children in care for the shorter period, Blacks experience significantly lower probabilities than Whites of return home and of adoption. Hispanic children have the same probability as White children of return home, but a considerably lower probability of adoption. For both minorities, progress towards exit is slower than that of Whites. In each of these cases, controlling for entry-level characteristics does not reduce the magnitude of the relationship. Controlling for process-level factors does influence group differentials. In almost all cases, however, significant ethnic differentials persist when both entry-level characteristics and process factors are controlled. Among the long-term cases, the only significant ethnic differential is to be found in the lower Milestone Rate of Hispanic children.

**The Role of Religion in the Agency Placement Process**

In this analysis the sample of 39 agencies has been subdivided into three analytical categories developed from a ranking of these agencies in terms of their exit rates. Normally, when agencies are categorized one thinks in terms of what might be called denominational categories: Catholic, Protestant, Jewish, Non-Denominational and City. One finds examples from most of these denominational categories within most of the three analytical categories. That is, they are distinct classifications. To be a Catholic agency does not tell us, automatically, whether that agency is a High, Medium or Low Exit agency. The same is true for Protestant agencies. However, all Jewish agencies in our sample fall in the High Exit category. All City (SSC) agencies are Low Exit Agencies. While the Protestant and Catholic categories, which together had over 62 percent of the sample caseload, have agencies in all three analytical categories, random placement in a Catholic or Protestant agency increases the chances of placement in a Medium or Low Exit agency.

The religious identification of individuals is strongly related to the denomination of the agency one is placed in. Consequently, one observes a tremendously complex placement pattern. Placement in an agency in one of the three analytical categories (High, Medium and Low Exit Agencies) is a function of ethnicity and religious identification. It also results from the more complex indirect process in which both religious identification and ethnicity influence the placement into a particular denominational agency which happens to be either a High, Medium or Low Exit Agency. The intricacies of this placement pattern deserve further attention not because they present an interesting puzzle, but because the glaring disparities among agencies means that the end result of the placement process is a differential probability of successful outcomes for children, and particularly for minority children.

# 5

## DIFFERENTIALS COMPARED: NEW YORK VERSUS NEW JERSEY

If we compare major indicators of effectiveness, there is considerable difference between the New York City foster care system and the experimental system in New Jersey's Southern Region. Table 15 below provides some clear examples. However, these stark contrasts raise more questions than they answer. For example:

- o Is this a fair comparison?
- o To what extent are these differences in performance explained by structural differences between the two systems?
- o How do these structural differences affect minority children and families?
- o To what extent is the effect due to manipulation of the system in New Jersey and can it be replicated so as to eliminate discrimination in New York?

In order to answer these questions, we must first give some practical details about the Permanency Services program, about how those rates were achieved, and how they were measured and compared.

**Table 15**

**Comparison of Key Outcome Indicators**

**for**

**New York City and New Jersey (Southern Region)**

| | MILESTONE RATES | ALL EXITS | RETURN HOME | ADOPTION |
|---|---|---|---|---|
| New York City | .025 | .20 | .10 | .10 |
| New Jersey | .344 | .44 | .31 | .13 |
| % Difference[1] | 1276% | 120% | 210% | 30% |

[1] Percent difference represents the following:
(New York City Rate - New Jersey Rate)/New York City Rate

## THE NEW JERSEY EXPERIMENTAL REGION

The Division of Youth and Family Services (DYFS) Region participating in the original Permanency Services project extends from below Trenton south to the Cape May peninsula. The seven counties served range from the large, urban-industrial complex of Camden on the Delaware opposite Philadelphia to the rapidly changing gambling and resort center of Atlantic City, to Cape May on the ocean, with extensive rural-agrarian areas in between.

Although this territory is close to one-third of the State, the seven District offices of DYFS, one in each county in this Region, serve approximately one-quarter of the DYFS clientele. In addition, an Adoption Resource Center, the centralized adoption service for the whole Region, is housed in the Regional Administration offices in Hammonton, at the center of the area.

Because of its diversity, every kind of client is represented: inner-city, largely minority groups in Camden; suburbanites in Cherry Hill and Mt. Holly; farm and migrant workers in the countryside; resort workers on the coast. Because virtually every kind of economic, environmental and demographic variation is to be found here, the area is highly representative in terms of conditions found surrounding public child welfare agencies elsewhere in the United States.

Although central administration and services emanate from Trenton, the newly organized and strengthened Regional Administrations have considerable latitude and authority. In the case of the Permanency Services demonstration, the Southern Regional Administrator was given full backing for this test.

## THE EXPERIMENTAL PROGRAM

With funding from the Edna McConnell Clark foundation, the Permanency Services experiment was a conscious effort to find an approach that would dramatically alter the public institutions and system of foster care. By restructuring existing services, case-flows, casework practices, staff alignments and supervisory structures for dealing with all foster children, from intake to discharge, the demonstration region has not added an extra program. It has instead sought to incorporate permanency work as an everyday part of its normal operations; displacing rather than supplementing traditional foster care services; using available staff rather than hiring new people or depending on special funding. These changes can therefore now be carried on without additional funds even though the demonstration is over. They are being replicated in the remainder of New Jersey at very minimal cost. Why this dramatic approach?

Prior demonstrations of note (e.g., Oregon Project, Spaulding) had created new organizations, detached from the mainstream of children's services in the states covered, and serving selected groups of children. These had demonstrated that children can be returned home, adopted, or prevented from coming into care in the first place. But once special funding is withdrawn, such programs fade away, leaving only small residual effects on the institution of foster care itself.

In 1976-77, the Clark Foundation invested in our pilot research which aimed at achieving a more fundamental impact. The question asked by the Foundation was: Can workers in present public institutions be made more productive in securing permanency for children? The advantages of such an approach are clear. Rather than depending on new and costly organizations to provide services to selected children, the "incentives to productivity" approach could engage and redirect the efforts of tens of thousands of workers and supervisors in existing organizations. The ultimate result could be an "institutionalization" of permanency-oriented casework, carried forward by the largest possible manpower base, and affecting virtually all the children in the care of such workers.

As previously reported (Lehman, Smith, 1977) our pilot study showed the approach to have great merit. We found that productivity in permanency work can be measured (and therefore rewarded) and that what casework units do -- appropriateness of casework --is more important than any other factor in determining the speed at which children are returned home or adopted. But we also found that appropriate casework is often impeded by "structural disincentives" linked to the absence of social and managerial supports for such work in units predominantly organized for other purposes.

These findings pinpointed factors that can be changed to make casework units more effective. To understand how, however, it is necessary to understand the significance of our finding that social casework "appropriateness" is a determining factor. Note that social services for children per se were not found to be necessarily important for permanency in New Jersey; much of the social work performed had little or negative influence on permanency. But when we examined the differences between less productive and more productive units we discovered that the tasks performed varied, and that the tasks performed by the most productive workers were so different in type, structure and frequency, that we were forced to coin the phrase, "permanency casework technology" to describe them.

Other factors, such as MSW degrees, worker attitudes, years of experience or lower turnover were not significant. Parental interest was, as Fanshel found it to be, highly important. Court review affected some cases. But when we controlled for these factors, appropriate casework activity emerged even more strongly as the decisive variable determining the child's progress toward permanency.

In talking about appropriate casework services, we found that it is important to distinguish between the level of such services and the level of child-caring services in general. In New Jersey, for example, the average social worker's caseload was 57 children, as compared with typical New York City caseloads of between 15 and 25. In New Jersey, however, we found that lower caseloads (and, by inference, higher expenditures) were associated merely with a higher level of activities which we describe as "bureaucratic-parental." That is to say, the less burdened social work units tended to expend more effort on their roles as agents of the State in loco parentis: substituting for the parents by arranging for dental care, chauffeuring children to appointments, intervening in disciplinary problems in the school and home, more often becoming attached to the children for whom they feel responsible. Higher caseloads (and, by inference, lower expenditures) were associated with more purposeful activity designed to secure the child's earlier return home or adoption.

Although it seems a paradox, these results imply that children receiving a great richness of services in the care and therapeutic categories (as measured by goods, buildings, medical care, furnishings, social work hours, psychiatric hours, or dollars) may nevertheless be deprived in comparison with other children who receive fewer services in the traditional sense, but instead receive services designed to restore them to family life. Thus, deprivation of services can mean that the children are deprived of services appropriate to restoration to family, even though they are not deprived of care.

In this context, our third finding assumes great importance. In the units studied, we identified social structures which supported supervisors and workers in performing tasks other than permanency casework, but which impeded permanency work. The most productive worker subunit, in fact, required protection by an interested manager, and felt obliged to take on larger than normal caseloads in order to deflect criticism. We found that, as a norm, workers are expected to do the visiting and chauffeuring and intervening in the foster family that the experienced permanency workers find counterproductive. On the other hand, for workers to plan and work with parents, to set and try to meet target dates, to badger clinics and welfare agencies for services needed by parents, or even to prepare a petition to free a child for adoption -- such activities are not only not expected, they are even frowned upon as a neglect of more "caring" duties.

Agency procedures tended to reinforce such social pressures. Managerial and technical supports for permanency casework were talked about, but were in fact rare. Formidable paperwork was required to return a child home or to change a plan to adoption, while virtually no effort was required to continue a child in care. For the most part "supervision" dealt with other issues. Training in permanency work was not part of the curriculum.

The conclusion was almost inescapable. We were, after all, looking at an agency that was organized primarily for other purposes. Protection and long-term care had been the norm. Permanency casework, while given widespread lip-service, and while it had generated a number of innovative special programs, had not yet become a raison d'etre or an organizing principle; and those who practiced it were still regarded as, at best, "odd-balls" in most units.

Far from being discouraging, however, these results were highly promising. If what workers do makes a difference, then redesigning their jobs and developing more appropriate technologies could yield increased productivity. If organizational and managerial structures impede productivity, they could be restructured to instead support it. This outlook undergirded the approach taken in the Southern Region. We hoped to create an organizational system whose purpose is to do permanency casework, and where such work is not only expected, but is measured, rewarded and protected because the supervisors and managers of the Permanency Services organization know that their work will be evaluated for success in permanency work, not other kinds of social work, for foster children.

It is also in this context that the word "incentives" took on heightened meaning. The normal incentives for permanency work, that is, the gratifications of success in restoring children to family life -- in itself rewarding -- can only rarely be achieved in the traditional structure. The pressures to do other work, and the lack of administrative and peer support generally make it difficult for "achievement" to operate as an incentive in the traditional foster care organization. Additional incentives, such as a bonus system, would be disruptive: on the one hand, such a system would encourage shoddy casework just to get the children out; on the other, it would be actively resisted because it would not reward all the other kinds of casework that the agency would continue to expect of workers. In a new structure, where permanency work is the primary goal to which everything else is secondary (and where permanency performance is measured), achievement could begin to operate as an incentive, and other incentives could be set up equitably and with some hope that they would work.

In brief, the restructuring of workers' tasks, the reorganization of supervisory structures, the development of new case management controls, and the creation of a unique Permanency Service were at the heart of the experiment. This restructuring accomplished several tasks. First, it sheltered workers from demands that they perform tasks and maintain practices that were antithetical to productive permanency casework. Second, it facilitated the freer development of the permanency "technologies" which our study showed lead to greater productivity. Finally, it created a milieu in which appropriate permanency casework is expected and measured, and therefore can be rewarded unequivocally. At the time it was implemented the approach had become so accepted that the Southern Region management and supervisors involved openly denied that it was a "demonstration" that was being planned. They appeared to have incorporated the concept as a more logical way to organize for the tasks they wanted to accomplish, and themselves took the lead in planning the changes to be made. Their creative input, together with that of DYFS executives in Trenton, provided much of the content for the project.

When fully implemented, major elements of the new structure can be described in terms of three sets of changes: changes in service delivery, changes in supporting structures and changes in policy. A more concrete sense of these changes can be gained from the following lists.

A. Service Delivery Changes

1. Creation of Permanency Services Units in each District Office.

2. Reorientation of remaining units to specialize in Family Services including prevention and protection.

3. Diversion of case flows, with screening and foster care intake focused on prevention and/or immediate exit planning prior to intake.

4. Job redesign: Completely changed job descriptions implemented via retraining, supervision and performance controls. Task descriptions are based on our observation of more productive "Model B" practices as illustrated in Appendix A. These are open-ended and evolved further over time as the "technology" developed.

5. Training in advanced "state-of-the-art" permanency casework techniques was given via two full weeks of classes. The training stresses the primary responsibility of the worker for goal-oriented, time-bound case planning but is eclectic with respect to techniques, which are imparted by consultants from other states. Supervisory and managerial employees and the Regional administrator all receive the same training.

6. Coordination with adoption processing is altered so that adoption workers become trainers and consultants. Permanency workers became responsible from the outset for parent-search and legal freeing processes, and for pursuing adoption as a contingency plan so that no time would be lost if it became the primary plan.

B. Changes in Supporting Structures

1. Creation of a Permanency Service managerial superstructure: A restructured Table of Organization creates lines of supervision, consultation and management, specifically to support permanency services, from the Regional Administrator down. In addition, a supervisory committee meets regularly to review and make recommendations regarding procedures, performance, needed resources, and exceptional case decisions. There is no longer a foster care administrative structure per se.

2. A permanency-oriented case management system: Primary accountability of workers for goal-oriented case management, procedural guides, recording formats and a reporting system were established. These are designed to:

   - o Structure case planning, progress recording and periodic review by the workers themselves.
   - o Provide clerical controls to insure tracking and timeliness.
   - o Identify case exceptions for supervisory trouble-shooting.
   - o Provide data for both exception and performance reviews at successive levels of management.
   - o Generate data for evaluation of unit performance and productivity.

3. Special resource network development: The development and/or sharing of legal, health and other resources needed to support permanency work became a specified responsibility of workers, supervisors and management, to be evaluated as one measure of performance. As reported in Chapter 2, this could even require alterations in other agencies' policies and practices, but was nevertheless successful.

C. Policy Level Changes

1. Clarifying Casework Goals and Priorities: Particular casework policy "protocols" were promulgated via the training program and were incorporated in the planning instruments given to workers. Under these protocols:

   - o First priority is given to "exit planning" for return home or, failing that, adoption. Long-term foster care, or even a plan to extend care beyond 12 months, is deemed an exceptional plan requiring special documentation and administrative review and approval.

   - o All foster children, including older, institutionalized and para-foster children, are deemed entitled to permanency processing. Administrative prioritizing for purposes of "phasing in" permits an initial focus on non-institutionalized children under 15, but selectivity or "creaming" is otherwise to be avoided. Ultimately, fully implementing offices "phased in" all segments of the foster child population.

2. Development of a Supportive Fiscal Policy: In order to eliminate fear that success would result in layoffs, budgeting and allocation of staff are no longer based on caseloads. Instead, allocations are computed based on child and AFDC populations in each catchment area. As foster care populations go down, units are permitted to retain staff and shift priorities to prevention and in-home family services.

## IMPLEMENTATION AND RESULTS

Although implementation was in fact not fully accomplished in every unit (see Table 16), the evaluation made by the Center for Policy Research at the end of 1980 showed substantial improvement in the performance of experimenting District offices. The following paragraphs summarize the evaluation report given to New Jersey State officials (Smith, Gurak, 1981).

In 19 months, for the seven-county Region, the pace of permanency casework activity increased 121 percent. During this time, Slack Time in permanency case processing was reduced by 38 percent regionally and by 74 percent in fully implementing counties, and the net foster care population was reduced by 31 percent in the seven District Offices, reflecting primarily 35 to 50 percent reductions in fully implementing counties.

Other services were also affected. Although the focus of the experiment was on family restoration or adoption for foster children, it also had cross-over effects on the direction, organization and technology of services to at-risk children in the community. In fully implementing counties, approximately 18 percent of the reduction in foster care utilization is attributable to the preventive effects of such changes at the "front end" of the DYFS service continuum.

The trend toward reduced utilization of foster care was unabated when last measured. Compared with 1979 population levels, a leveling out below the 50 percent mark has already occurred or is predicted for at least three of the experimental counties this year (1981). The rate at which this is being accomplished is unprecedented. The previous most successful four-county Oregon Project took four years to achieve a 31 percent reduction.

The experimental approach worked in tandem with the new State-wide placement review system. However, the other three DYFS Regions which experienced review without the added experimental approach, obtained only 10 percent reductions in foster care populations. In addition, while welfare population trends may account for some cuts in foster care populations in the other Regions, this is not so in the experimental Region where the AFDC child population grew slightly.

**Table 16**

**Differential Implementation of Key Experimental Protocols in Seven New Jersey Counties**

| Office | | Specialization | Non-Selectivity | LTFC[a] on Exception-Only Basis | Case Management Controls | Training in PCW[b] Technology |
|---|---|---|---|---|---|---|
| Fully Imple-menting | (Cumberland, | yes | yes | yes | partial | yes |
| | Salem, and | yes | yes | yes | partial | yes |
| | Atlantic) | yes | c | yes | partial | yes |
| Partially Imple-menting | (Camden) | no | yes[d] | no | yes | yes |
| Mimimally Imple-menting | (Gloucester, | minimal | c | unknown | f | yes |
| | Burlington[e], | no | no | no | partial | yes |
| | and Cape May[e]) | no | no | no | f | yes |

[a] LTFC = Long-term or extended foster care planning

[b] PCW = Permanency Case Work

[c] Both Atlantic and Gloucester "creamed" the caseload in the sense that only selected children were transferred to the specialized units. In Atlantic's case this had the effect of leaving in General Supervision children over 14 years old, or with less than 7 months in care. Gloucester was much more selective, left much larger numbers under general supervision, and on this basis is considered in the minimal implementation category even though in performance it more closely paralleled the middle-ranked Camden.

[d] Camden was non-selective in the sense that it included every foster child's case in the control system used to monitor permanency processing.

[e] Burlington converted to full implementation only in the last two months of the test period. Cape May reported plans to implement permanency casework specialization in 1981. Prior to September 1980 Burlington reported approximately 140 children as receiving permanency services, compared with Cape May's 18 (est.). However, as is indicated by their age and time in care most of Burlington's 140 were selected as candidates for continued care and preparation for independent living, not permanency processing.

[f] Inclusion of only very small numbers of children in project in Gloucester and Cape May produced severely limited reporting.

Within the experimental Region, effectiveness correlates with degree of implementation. All District Offices received the same training in the new Permanency Casework technology. However, training in the absence of structural and managerial changes was only minimally effective. The creation or non-creation of specialized Permanency Services units marks the clearest dividing line between more and less effective operations. As indicated in Table 16, compliance with experimental protocols regarding caseload management, case selection and exceptional case plans was also positively related to greater effectiveness.

Disruptions were few. Even though greatly increased numbers of children were returned home -- and this meant taking risks that would not have been taken before -- there is remarkably little evidence of harm to children. One indicator of this is the record with respect to disruptions, i.e., the return to foster care of children previously restored to their families. Our 1977 pilot study showed such disruptions to range between 13 and 40 percent of the children in our sample who were returned home over the period of 24 months. The comparable ratios for 19 months in the experimental sample are 5 percent in fully implementing offices and 5 percent in the partially implementing "control" office, Camden.

The resistance of some supervisors to controversial protocols, especially to those relating to specialization and exceptional case plans, was the most significant barrier to implementation. To some extent this resistance seems to reflect philosophical and ideological differences in the social work profession, but it may also reflect the fact that the so-called resistant managers received less attention or missionary work, and had less planning assistance in working out their participation in the program. The fact that they were thus permitted autonomy with respect to many aspects of implementation in addition to the deliberate creation of a "control" in Camden, has contributed further invaluable comparisons for purposes of evaluation. But it has also pointed up the values to be gained from more thoroughgoing planning and development with District Office supervisors, if the experiment is to be replicated elsewhere.

The Regional Adoption Unit was overwhelmed. Plans for the project unfortunately underestimated the impact on the adoption workload. We had assumed that adoption worker productivity would increase. In addition, District Offices took over much of the investigative and legal documentation work formerly done by adoption workers. However, as the result of the success of the program at the District level, the Adoption Unit found itself supervising increasing numbers of children with no added staff. The fact that they maintained virtually the same level of output in placements, even though swamped with routine non-adoption work, shows that productivity in adoption work may in fact have increased. Added staff is needed, however, possibly on a paraprofessional level, to deal with the ballooning of routine general supervision work in the adoption unit.

The Permanency Services model is extremely cost-effective. Since it is based on the restructuring of existing resources, not the adding on of new services, the New Jersey Model is both more economical to implement and a more permanent institutional reform than prior experiments in this field. Except for the need to supplement the adoption unit, the only expense has been for the training, consultation and research services provided by the Center for Policy Research, as funded by the Edna McConnell Clark Foundation.

Replication in other regions and states appears quite feasible. Effectiveness was tied to organizational and policy reforms, and not to demographic or social factors which policy cannot change. Budgetary advantages make these reforms very attractive.

**Terms of Comparison**

Is it fair to make comparisons and draw conclusions from this experiment in New Jersey in reference to the treatment of minority foster children in New York City? In most respects we believe it is possible to do so, provided one takes into account certain characteristics of the data. First, the Southern Region achieved these results with full implementation in three

counties, partial implementation in one very large office and minimal implementation in three more. This makes the data roughly comparable with the three performance levels in New York. However, one must realize that the differences in New Jersey represent structural differences, not an arbitrary ranking as in New York. We attempt to make this clear by labeling the ranked groups in New Jersey as Fully Implementing, Partly Implementing and Minimally Implementing as compared with the New York categories High Exit, Medium Exit and Low Exit.

Furthermore, differences in case-flow protocols and structure make exact comparisons difficult in several respects. First, fully implementing units in New Jersey for the most part do not add children to the permanency service caseload unless the child is in care six months or if there is some doubt it could exit within six months. Unlike New York, quick in-and-out cases remain under Family Service unit supervision and therefore do not appear in all our samples. As in New Jersey, we have "equalized" samples for purposes of analysis in all tables by comparing only cases of children in care over six months and under 16 years of age. (Since equalization in this manner results in no significant differences in statistical outcomes in New York or New Jersey, we assume we have merely enhanced the accuracy of our comparisons by this procedure).

Second, cases of children for whom the plan becomes adoption, under our protocols in New Jersey, are transferred to the Central Adoption unit. Our sampling method, while it assessed the performance of that unit separately (its exit rate, in spite of being swamped and understaffed, was .37) does not relate that experience back to the District Office. As a result, while the rates of return home are perfectly valid for comparison with New York agencies, adoption exit rates are not comparable. Under our procedures, the prognosis for adoption is quite good for children transferred to the adoption unit from fully implementing counties, while prognosis in partial and minimally implementing counties may be somewhat less optimistic. Since discounting the latter rates tends to confirm the structural hypothesis even more, the reader is free to do so if he or she wishes.

Finally, data regarding casework activity is not available for the last six months in New Jersey, and data regarding disruptions -- the return of a child to care after exit -- have not been gathered in New York. Therefore, we do not compare these factors.

Heeding these caveats, we still have considerable amounts of comparable data on which to base comparisons. We should deal first, however, with one discrepancy that is only apparent but that is nevertheless revealing. Table 15 at the beginning of this chapter shows a difference of 1276 percent between milestone rates in New York and New Jersey. This ratio so far exceeds even the 210 percent spread between Return Home rates that it seems ludicrous.

At first glance, it would appear that the anomaly in Milestone Rate is most reasonably ascribed to the fact that New Jersey workers used specially designed recording forms which encouraged recording of such milestone events. We assume that this accounts in part for the discrepancy. However, by their nature, milestones are difficult to fake and hard for coders to miss, since most require a series of casework steps to produce. Our 1976 New Jersey pilot study also found discrepancies between milestone rates and exits that were quite marked between more and less productive offices. On examination we found that less productive units obtained more exits with fewer milestones precisely because they omitted pertinent casework steps. For example, they more often returned children home without preparing the child for the return, without securing improvements in family living conditions or social supports, etc. As a result, the children they returned home were also more frequently returned to foster care, with disruption rates in this respect running as high as 40 percent of all children returned home.

The discrepancies between milestone and exit rates for New York and New Jersey presented in Table 15, therefore, strongly imply not only that New York children exit less frequently, but that, when they do, they are often being moved with less casework preparation.

**Effects of Structural Change**

Although the above discussion of interactions between casework milestone rates and exits is instructive, in what other ways can structural differences affect actual performance? In New Jersey, the structural hypothesis and particularly the mandate to reorganize services into functionally specialized units, were so controversial, that we were at pains to validate statistically the greater success of the reorganized units. From the beginning, the Partially Implementing District office in Camden was deliberately permitted to go the route of implementing without restructuring because the District Officer Supervisor argued that a "control" was needed and he intended to show that a general practice model is superior. Since he had a reputation as a very able manager and since funds for evaluation were limited, we welcomed the opportunity to obtain a true control unit against which to measure the effectiveness of the changes being made. As noted above and in Table 16, three other offices followed Camden's example by resisting implementation in one way or another, and they provide the added inadvertent control of our Minimally Implementing category in New Jersey. Before examining the evidence concerning the structural origins of differences in outcomes, some attention needs be given to the basic composition of these analytic groups.

Table 17 provides basic data permitting a more detailed comparison of the situations of New York City and New Jersey. It includes descriptive data on entry-level characteristics and outcomes for New York City (total) and its High Exit and Low Exit agencies, and for New Jersey (total Southern region) and its Fully Implementing, Partially Implementing and Minimally Implementing district offices.

Several similarities and several differences stand out. Both systems serve predominantly minority populations. However, in New Jersey the number of Hispanic children is relatively small while the number of white children is relatively high when compared with New York. The average age at placement was 5.33 in New York and an almost identical 5.38 in New Jersey. New York case records, however, revealed a higher incidence of serious disabilities .16 versus .06 in New Jersey. Whether this reflects a real difference or a differential focus on disabilities cannot be determined. (This difference is itself suspect because New York agencies receive higher reimbursements for care of children so labelled.) The profiles for family and child reasons for placement are quite similar in both states. Those differences which do exist probably result from the slight differences in recording procedures (see Appendix B). In New York the entry-level characteristics of children in the Low-Exit agencies were clearly the least advantageous. In New Jersey, no such pattern emerges. To a greater extent than in New York, the entry-level profiles of children in the three agency categories of New Jersey are similar.

The remainder of Table 17 presents comparative data on outcomes. The average number of months in care (Duration) for New Jersey foster care children was 5.06 years; a figure which is only slightly lower than that for New York (5.37 years). In both jurisdictions the least efficient agencies vis-a-vis permanency activities (Low Exit agencies in New York, and Minimally Implementing agencies in New Jersey) have significantly longer durations in care (6.37 and 6.92 years, respectively). Real differences between New York and New Jersey exist in the realm of the Milestone Rate and exits. Table 15 indicated that, overall, the New Jersey milestone rate was significantly higher than was New York's. Similarly, foster children in New Jersey were considerably more likely to exit to a permanent family environment. This is especially true for return home. Table 17 demonstrates that the organizational context (specified in terms of level of implementation of the permanency demonstration) is strongly associated with the milestone rate and other outcomes. The highest Milestone Rates occurred in the fully implementing counties; the lowest rates in the minimally implementing counties. The same pattern occurs for exits. A more complete assessment of the impact of the structure of service activities requires a longitudinal assessment.

To this point we have cross-sectional evidence that: (1) New Jersey agencies are more effective than New York agencies (only the minimally implementing offices have less advantageous outcomes than New York children in high exit agencies); and (2) the level

Table 17

Comparison of New York City and New Jersey

Outcomes and Entry-Level Characteristics for Cases in Care at Least Six Months

| | NEW YORK CITY (Total) | NYC High Exit Agency | NYC Low Exit Agency | NEW JERSEY (Total) | NJ Fully Implementing | NJ Partially Implementing | NJ Minimally Implementing |
|---|---|---|---|---|---|---|---|
| Black | .65 | .56 | .74 | .54 | .50 | .59 | .54 |
| Hispanic | .20 | .20 | .16 | .05 | .06 | .07 | .00 |
| White | .15 | .24 | .10 | .39 | .44 | .34 | .46 |
| Age at Placement | 5.33 | 6.20 | 4.88 | 5.38 | 5.71 | 4.85 | 5.48 |
| Serious Disability | .16 | .18 | .23 | .06 | .08 | .01 | .08 |
| Parent-Surrender | .08 | .08 | .10 | .04 | .02 | .04 | .06 |
| Parent-Problem | .25 | .21 | .32 | .19 | .21 | .15 | .23 |
| Parent-Coping | .28 | .33 | .23 | .27 | .31 | .20 | .28 |
| Parent-Request | .12 | .14 | .10 | .08 | .10 | .06 | .07 |
| Neglect | .10 | .09 | .12 | .20 | .18 | .26 | .13 |
| Child Reason[1] | .28 | .33 | .27 | .12 | .11 | .14 | .11 |
| Duration | 5.37 | 4.70 | 6.37 | 5.06 | 4.59 | 4.68 | 6.92 |
| Milestone Rate | .025 | .033 | .012 | .344 | .561 | .213 | .074 |
| Exit | .20 | .32 | .05 | .44 | .56 | .45 | .15 |
| Exit-Home | .10 | .14 | .04 | .31 | .41 | .30 | .13 |
| Exit-Adoption | .10 | .18 | .01 | .13 | .15 | .15 | .02 |
| No. of Cases | 925 | 332 | 247 | 280 | 131 | 88 | 61 |

[1] For New Jersey, Child Reason is derived from the same sets of codes as are family reasons. For New York two distinct data sources exist (See Appendix B).

**Table 18**

**Comparison of Milestone and Exit Return Home Rates**

| | NEW JERSEY: BASE YEAR | NEW JERSEY: EXPERIMENTAL YEAR | NEW YORK CITY |
|---|---|---|---|
| A. Comparison of Milestone Rates | | | |
| Fully Implementing | .025 | .561 | .033 (High Exit) |
| Partially Implementing | .033 | .213 | .027 (Med. Exit) |
| Minimally Implementing | .048 | .074 | .012 (Low Exit) |
| Total | .034 | .344 | .025 |
| B. Comparison of Return Home Rates | | | |
| Fully Implementing | .15 | .41 | .14 (High Exit) |
| Partially Implementing | .20 | .30 | .10 (Med. Exit) |
| Minimally Implementing | .07 | .13 | .04 (Low Exit) |
| Total | .14 | .31 | .10 |

of implementation of the new permanency technology in New Jersey determines the overall effectiveness of an agency in terms of exits and movement towards exit. This second point is the one that requires longitudinal su[illegible]. This is to determine whether or not the success of the fully implementing agencies merely reflects their history of higher levels of success. Table 18 provides a comparative view of outcome measures for the three New Jersey agency categories and the three New York categories. In addition it provides data for New Jersey from a sample of cases for the year prior to implementation. Consequently, the reader can assess the extent to which reorganization contributed to the outcome levels observed for New Jersey.

Three distinctive and important patterns stand out. First, prior outcome levels in New Jersey were not markedly different from those observed in New York City. The exit rate in New Jersey had been .21 as opposed to .20 for New York. The milestone rate for New Jersey had been .053, as opposed to .025 for New York. While notably higher in New Jersey, that differential appears inconsequential when compared to the post-implementation data presented in Tables 15, 17 and 18.

Second, within New Jersey implementation is associated with longitudinal increases in the Milestone Rate and in the exit rate. These increases occurred throughout the system, but much more dramatically in the partially and, especially, fully implementing offices. For example, the milestone rate increased from .025 milestones per month to .561 milestones in fully implementing offices (a 21-fold increase). In the minimally implementing offices the milestone rate increased from .048 to .074.

The third and, in some ways, most important point is simply that improvement did not occur in those places that were doing best prior to implementation. Rather it occurred in those places that most fully implemented, at all levels, the permanency focused service-management reorganization plan. Those offices which fully implemented the plan had the lowest milestone rate and second lowest exit rates prior to implementation. The minimally implementing agencies actually had the highest milestone rate prior to implementation. Clearly, the structural changes brought about through full implementation of the permanency services project caused dramatic increases in the speed with which foster children return to permanent family environments.

**Ethnic Differentials Compared**

Our original question was: Are there structural factors which permit or encourage service differentials to the detriment of minority children? In New York we located service differentials in High Exit agencies, and between High, Medium and Low, which interact with ethnic sorting procedures at intake to produce disproportionately low levels of both services and exits for minority children.

If we look for a comparable situation in New Jersey, we must first understand that the same sorting procedures are not operative. Placement is geographically determined and responsive to residential segregation patterns, but not subject to ethnic screening and sorting at intake. Thus placement in a less effective agency may have a discriminatory impact not because minority children are distributed to less effective agencies as a matter of policy and practice, but because services are permitted to be less effective in regions where minority families represent a larger segment of the population. Our data show a pattern of differential outcomes for minority children in the experimental region as a whole. It would of course be surprising if we did not find such differentials. The critical question is, are these differentials structurally determined and if so, how are they impacted by the restructuring in New Jersey?

Table 19 provides a comparison of the coefficients for ethnicity as determinants of outcomes while controlling for other entry-level characteristics (Part A). With one exception, ethnic differentials are far less marked in New Jersey than in New York. For Hispanics there are no significant coefficients. Net of entry-level characteristics, being Hispanic in New

Jersey's foster care systems does not appear to influence outcomes. For Blacks, negative associations with duration in care and the Milestone Rate are small and not significant and there is clearly equality with respect to exit by adoption in New Jersey. In New York, by comparison, significant negative coefficients are apparent for all of these factors, including adoption and Milestone Rate, for Blacks and Hispanics.

It is only with respect to Exit-Home that the New Jersey data are as negative for Blacks as they are in New York, and this is the sole source of the significant differential in the overall probability of exit for Blacks in New Jersey. Can this one pattern of differential treatment of Blacks in New Jersey be attributed to structural factors?

Part B of Table 19 provides the ethnicity coefficients for the regression of outcomes on entry-level characteristics and an agency category. Because New Jersey functions on a county catchment area basis, there is no differential assignment to agencies. Hence the inclusion of the indicators of type of agency performs a function distinct from that performed with the New York data. In New York the agency variables indicated an underlying sorting pattern by the foster care system, and consequently were viewed as process variables. In New Jersey, the inclusion of the agency variables indicates whether differences in the residential distribution of minorities across catchment area boundaries (factors outside of the control of the foster care system) can explain ethnic differentials. The inclusion of the agency-type variables had no influence on the ethnic coefficients. What this means is that there is no disproportionate tendency for Blacks or Hispanics to reside in counties with either Fully, Partially, or Minimally Implementing district offices. The agency variables are themselves strongly associated with the outcome measures, indicating once again that the probability of exit, high Milestone Rates, and short duration in care are positively associated with location in a county that fully (or at least partially) implemented the structural reorganization.

Since this return home differential for Blacks cannot be attributed to sorting at intake, we examined the possibility that it might be related differentially to ethnic residential patterns. In this respect examination of the actual distribution of ethnic minorities in the units' caseloads is instructive. The seven counties in the experimental region vary in terms of their racial composition. The county with the highest proportion of Black children (Atlantic) in its caseload (70.2 percent) was one of the Fully Implementing counties. The county with the smallest proportion of Black children (Cape May) in its caseload (25 percent) was one of the Minimally Implementing counties. Overall, 53.1 percent of the caseload of the three Fully Implementing counties was Black; 59.1 percent of the Partially Implementing county's caseload was Black; and the percent for the three Minimally Implementing counties was 47.2. Clearly, district office effectiveness does not correlate with the size of the minority client population.

Is there any other structural factor that would explain the differential for return home of Black children? Only one pattern appears to explain the difference, and that is the differential processing of Black children revealed in Table 20. The equality of return home rates for Whites and Blacks in Fully Implementing units is in stark contrast to the great disparity of rates in the Partially Implementing county, Camden, and the somewhat less significant pattern in the Minimally Implementing counties. The restructured units are the only ones not exhibiting a discriminatory pattern. This implies that full implementation of the structural reorganization of services may also have the effect of eliminating practices which produce ethnic differentials (8).

## SUMMARY

This chapter describes the genesis of the structural hypothesis and its application in a major demonstration project in the State of New Jersey. In addition to presenting a comparison of traditional vs. restructured children's services in one state, common data elements have permitted us to compare New Jersey with our previously discussed findings in

## Table 19

## Ethnic Differentials in Outcomes in New Jersey[1]

| | EXIT | EXIT-HOME | EXIT-ADOPTION | DURATION | MILESTONE RATE |
|---|---|---|---|---|---|
| A. Determinants of Outcomes Controlling for Entry-Level Characteristics Alone | | | | | |
| Black | $-.14^{b}$ ($-.13^{a}$) | $-.15^{b}$ ($-.12^{a}$) | .00 (.01) | .03 ($.09^{a}$) | $-.08$ ($-.13^{a}$) |
| Hispanic | $-.02$ ($-.08^{b}$) | .03 ($-.07^{c}$) | $-.08$ ($-.07^{a}$) | .04 ($.11^{a}$) | $-.08$ ($-.14^{a}$) |
| Age at Placement | $.04_{b}$ | $.10^{c}$ | $-.07$ | $-.33^{a}$ | .03 |
| Serious Disability | $-.12^{b}$ | $-.14^{b}$ | .01 | $.21^{a}$ | $-.09$ |
| Parrent-Surrender | $-.01$ | $-.01$ | $-.00$ | .04 | $-.08$ |
| Parent-Problem | $-.02$ | $-.02$ | $-.00$ | $-.04$ | $-.09$ |
| Parent-Coping | .03 | .06 | $-.05$ | $-.01$ | $-.14^{c}$ |
| Parent-Request | .08 | $.03_{b}$ | $.08_{b}$ | $.02_{c}$ | .06 |
| Neglect | $-.04$ | $-.17^{b}$ | $.19^{b}$ | $.14^{c}$ | $-.12^{c}$ |
| Child Reason | $-.09$ | $-.06$ | $-.06$ | $-.02$ | $-.14^{c}$ |
| $R^2$ | $.09^{b}$ | $.10^{a}$ | $.07^{b}$ | $.20^{a}$ | $.05^{c}$ |
| B. Coefficients for Ethnicity and Agency Type from Regression of Outcomes on all Entry-Level Characteristics and Agency Categories | | | | | |
| Black | $-.15^{b}$ ($-.01$) | $-.16^{a}$ ($-.03$) | $-.00$ ($-.02$) | .04 (.06) | $-.08$ ($-.08^{c}$) |
| Hispanic | $-.05$ (.02) | .01 ($-.01$) | $-.09$ (.02) | .07 ($.08^{b}$) | $-.10$ ($-.11^{a}$) |
| Fully Implementing (High Exit Agency) | $.42^{a}$ | $.39^{a}$ | $.20^{a}$ | $-.29^{a}$ | $.36^{a}$ |
| Partially Implementing (Medium Exit Agency) | $.30^{a}$ | $.20^{a}$ | $.18^{a}$ | $.31^{a}$ | .09 |
| $R^2$ | $.16^{a}$ | $.15^{a}$ | $.10^{a}$ | $.26^{a}$ | $.14^{a}$ |

[1] Coefficients in parentheses are for New York City. In part B, High Exit Agency and Medium Exit Agency agency are control variables for New York (in place of Fully Implementing Agency and Partially Implementing Agency).

**Table 20**

**Comparison of Exit Return Home Rates**

**in New Jersey by Ethnicity**

| Agency Type | All | White | Non-White | Black Only[1] |
|---|---|---|---|---|
| Fully Implementing | .40 | .39 | .40 | .40 |
| Partially Implementing | .30 | .51 | .19 | .13 |
| Minimally Implementing | .13 | .18 | .09 | .09 |

[1] Differential rates for Hispanics are omitted because N's are too small if disaggregated.

New York. On this basis we have drawn some key inferences regarding the impact of structural factors on the level and effectiveness of services to minority children. These may be summarized as follows:

- Although ethnic and religious sorting results in differential placements and has differential impacts on services to minority children in New York, no such pattern emerges in New Jersey. There placement by catchment area does not result in more frequent placements of minority children in less effective agencies. On the contrary, they appear as likely to be placed in the more effective agencies. Differentials in treatment, to the extent they exist, appear related to the other structural factors in the agency system.

- The impact of functional structure on services to foster children is highly evident. This has been demonstrated (a) over time, by comparing baseline data with experimental results in New Jersey; (b) cross-sectionally, by comparing the effects of differing levels of restructuring in New Jersey and between New Jersey and New York; and (c) with respect to ethnic differentials within each configuration.

- Comparison over time shows New Jersey agencies starting at a level of performance akin to that found in New York, and then rapidly improving rates of activity, progress and outcome, as they implement a more advanced technology combined with a functional restructuring of services.

- Even though changes in technology improve productivity in most offices, cross-sectional comparison shows that productivity levels are more directly related to structural changes in New Jersey than to changes in technology alone.

- Comparison of ethnic differentials shows that these are more muted in New Jersey as compared to New York, and are statistically significant only with respect to Blacks and only with respect to the return home option. Closer cross-sectional analysis of return home rates shows this difference also to be related to structure. Although our baseline data do not permit analysis of changes in ethnic differentials over time, fully implementing counties show no differential pattern in the experimental period, while the partially and minimally implementing counties do. Since techniques for overcoming the disadvantages of race and ethnicity are a strong element in the Permanency Services training curriculum, the inference that such techniques are still largely thwarted in traditional structures is strongly supported by these findings.

# 6

## CONCLUSIONS AND RECOMMENDATIONS

Some of the conclusions to be drawn from the studies discussed in this monograph may be summarized as follows:

1) There are structural factors operating within the foster care system which (a) create and maintain ethnic differentials in both services and outcome to the detriment of minority children and which (b) lead to slower progress in New York to the detriment of all foster children.

2) The factors which create these results are policy-malleable; that is they may be manipulated by policy makers so as to reform the system, change the structure and produce different results.

Although these findings are very challenging, it is difficult and perhaps premature to draw conclusions and to make recommendations with regard to the New York City foster care system. In New Jersey it would seem that public officials are already on the right track. There is no evidence that preferential sorting policies place minority children disadvantageously at intake. Dissemination of the New Jersey Permanency Services Model, which has now been mandated for the whole state, can be predicted to reduce inequality in processing wherever it is fully implemented. The successes of predecessor models in California and Oregon combined with the success in New Jersey indicate that the model may be further adaptable to conditions in many other states. Ordinarily, we might be able to predict success in New York City also, but three sets of factors or conditions militate against easy solutions there. These may be summarized as follows.

First, in New York, in addition to service differentials in processing, ethnic sorting procedures at intake produce a prior form of segregation. Because of the glaring disparities among agencies, this segregative sorting process itself results in an even lower probability of successful outcomes for Black and Hispanic children. Second, the particular mix of public and voluntary agencies in New York and the conflicting roles of public and voluntary officials in the New York City system, present a much more thorny political context into which any solution must fit. And third, success under the New Jersey model is somewhat dependent upon the agencies' ability to manipulate the larger social services and health systems in each community. But, the larger services system in New York is a much more problematic arena into which to introduce such changes.

All the above factors are intertwined and problems with respect to one may not be susceptible to solution without considering solutions of the others. With respect to the discriminatory effect of sorting at intake, we are confronted immediately with a dilemma. In theory, if one were to eliminate the religious test and replace the current system with a random assignment system, this would eliminate the discriminatory impact at entry. However,

given the wide variation in agency effectiveness, assignment of children by lottery would merely insure that Whites are harmed as much as Blacks. If the State and the City cannot guarantee assignment to an effective agency, then assignment by lottery to an ineffective agency is a form of deprivation whether one is White or Black. Since only 9 percent of the sample were in the two agencies that even approached the levels of effectiveness achieved in New Jersey, only a handful of children would not lose by random assignment. This would continue to be true even if the least effective 50 percent of agencies were to be closed down.

Further, if we look closely at the interaction between foster care and the larger system of social and health services in which it is imbedded in New York City, we must consider the possibility that the differential effects noted in foster care are actually part of a larger pattern of discrimination against minority children and families. The following comparisons strongly suggest such a possibility.

As noted in Chapters 2 and 5, even before the implementation of the Permanency Services experiment in New Jersey, foster children represented only 25 percent of the DYFS clientele. Seventy-five percent were receiving in-home family social services including protection, prevention, homemaker and social casework services. The Permanency Services experiment reduced the percentage of DYFS clientele in foster care to below 20 percent for the region as a whole and close to 15 percent in fully implementing counties. This decline continued unabated and by the end of 1980 the percentage for the whole state was under 20 percent. The contrast with New York City is startling. There, comparable recent data indicate that foster children represent not 15 percent or 20 percent, but 55 percent of the children receiving child and family social services (Mayor's Task Force, 1980).

This situation strongly implies that in New York City foster care is drawing disproportionate child welfare resources and that children and families are being deprived of other services as a consequence. This supposition is supported by other data. Thus, expressing all children's services caseloads as a percent of AFDC children, one finds that even though the percent receiving foster care was much lower in New Jersey, the percent receiving all services in New Jersey in 1979 (11.4 percent) was 28 percent higher than in New York City (8.9 percent). With an AFDC child population that is 36 percent lower than New York City's, New Jersey nevertheless provides services through DYFS to almost 45,000 children in a given month. This is approximately the same number as are estimated to receive services in New York City including foster children and children in protection, family service and purchased prevention programs (Mayor's Task Force, 1980). The number of children in foster care in New Jersey (1980), however, was 7,545, compared with New York City's 24,000, and the cost of foster care alone in New York, over $300 million, was more than double the $144 million New Jersey spent on all youth and family services, including services to the 80% served at home in their own communities.

These data tend to contradict the statements of leading authorities on foster care in New York when they say that "federal funding limitations are the most serious obstacle" to shifting budgetary priorities to preventive and family supportive services (Mayor's Task Force, 1980). Clearly this has not been true in New Jersey. Based on the findings outlined in this monograph, one is forced to look for other explanations. In particular, one must strongly suspect that it is the organization of services in New York that not only explains the extraordinary priority given foster care but that forms the principal barrier to change.

This logic also implies that the present structure of services has the effect of discriminatorily depriving minority children of family supportive and preventive services which otherwise would exist in their neighborhoods under a catchment-based organization of social services.

A majority of the distinguished experts and citizens who constituted the Mayor's Task Force on Foster Care in 1980 recommended the reorganization of New York into a catchment-based "community social service system." It was noted in Chapter 5 that such an organization of children's services in New Jersey, while it did not evince a discriminatory maldistribution of

services, and while it appeared to reduce intake to foster care, did not in itself make New Jersey markedly superior in returning children to their families or in obtaining adoption for them once they have been placed. Further technological and structural changes were required. But the basic non-discriminatory political and geographical distribution of a spectrum of services was in place to support the technological and structural changes accomplished by the Permanency Services program. This in turn yielded less discrimination in processing, less discriminatory outcomes, and shorter terms in care. The question one must answer in New York is this: Can the present system be altered so as to raise its effectiveness for all children and families to more appropriate levels, and to eliminate discriminatory processing, without first creating a non-discriminatory, catchment-based community and family social service system?

There is, after all, no model for the implementation of such changes in a context similar to New York's. The effective models as developed successfully in California, Oregon and New Jersey were all developed in catchment-based public agencies. This means that these model agencies are from the outset directly invested with legal authority for planning and services, as well as for the care of the children. They deal with parents as agents of the state and with other public agencies as peers. They accept court orders as public servants and are accustomed to going to court regularly on other business such as protection complaints. All of the agencies are responsible for a spectrum of family social services other than foster care. All customarily deal with parents. Because the model agencies are catchment-based, they routinely place children within their own counties only. Out-of-area placements are rare and, of course, religious and ethnic preferences, while they may operate sub rosa, are not a legal factor influencing intake or placement.

In New York City all of the above conditions are reversed. Eighty-five percent of the children are in agencies staffed by religious, laity and degreed persons with derivative and professional rather than legal authority. The agencies are not catchment-based and do not directly administer and relate to a spectrum of family services in the children's communities. On the contrary, they answer to at-large religious, professional and charitable constituencies unrelated to their client communities. They have traditionally specialized in foster care and adoption and are, for the most part, unfamiliar with protective services and family services. They are, therefore, unused to family casework with biological parents and are without service connections within the parents' communities. Indeed they are so unfamiliar with the need to maintain parental responsibility for the child that they do not hesitate to place the children far from home. Eighty percent of New York City children are placed out of county (Mayor's Task Force, 1980). The voluntary agencies are separated both legally and philosophically from the public agencies that do have legal responsibility for the children. They do not regard themselves as public servants, but as charitable institutions. Their workers respond to the directives of judges and commissioners not as public servants, but as representatives of charitable and professional interests outside the public domain. They reserve the right to exercise religious preference and other forms of selectivity. They insist on a degree of confidentiality and professional prerogative that would make redirecting and monitoring their casework well nigh impossible for any public authority; and they are even now litigating to further expand the scope of that confidentiality and the autonomy that goes with it.

In short, given such an unusual set of conditions, not only is it impossible to predict how the more effective models would work, but we are at a loss to see how to even attempt such an experiment without making fundamental alterations in the whole fabric of political, geographic and institutional arrangements surrounding foster care in New York (10).

## POLICY IMPLICATIONS

With respect to variations in the political organization of the social services in the United States, New York City and New Jersey are, of course, poles apart. The above discussion draws further attention to the fact that such structural differences may have discriminatory effects on children and families generally, and on minority children and

families in particular. But it also points up some of the difficulties faced by policy makers if they wish to reform such systems. In this connection, it may be useful to review the stakes involved in reform. These may be summarized under the following headings: (1) providing supports to family life, (2) prevention of mental illness, (3) securing the constitutional rights of poor and minority children, (4) improving productivity and cost effectiveness and (5) changing roles for religion, charity and voluntarism. This is a curious list since, politically, it cuts across conservative and liberal agendas alike. The policy implications, in each of these five areas, are very compelling.

**Implications For Family Policy In The United States**

In recent years, Kahn, Kamerman (1976, 1978) and others have strongly advocated the development of community-based personal social service systems as a chief family policy need in the United States. Political conservatives, on the other hand, are skeptical about any approach that involves social services and social workers. "Unwarranted intrusion into the family" and "They don't work" are two of the most common accusations aimed at social services to poor and minority families. Clearly, if one were to use the New York child welfare system as an example, one would have to admit that both charges are true. On the other hand, our New Jersey findings point to some light at the end of the tunnel. With respect to New York and other systems that may work as New York's does, our data strongly support the perceptions of one of that system's most experienced executives. George Silcott, the former director of the Wiltwyck School -- a New York foster care agency founded by Eleanor Roosevelt that specialized until 1981 in services to children that other agencies found "too difficult" or "too disturbed" -- made the following statements in an August 1978 interview in The New Yorker:

> We'd much prefer to have all our children stay in the communities that they're going to have to return to. Wiltwyck has been putting a lot of its energy and resources into developing community-based programs in the last several years. I've been here since 1969, and though we all put a great deal of work into helping the kids, it becomes clear to anyone who does what we do that the help we give was needed years ago. And not just with kids, either, but with their families.

When asked whether family oriented programs were the rule or the exception in the New York child-care system, Mr. Silcott replied:

> Unfortunately, the exception. While there is interest expressed in developing services for the whole family in the child-welfare system, the entire welfare system is designed to pull children out of their homes. It works like a vacuum. What we try for, and what is lacking in general for the poor, is a place that people can easily turn to for help. In our neighborhood centers, we try to restore that tender balance between parents and children that so often gets skewed when there are just too many, many problems burdening a family. Most of the time, these kids just fall through the cracks in the health, social-service, and education systems and into the court. Their parents have learned that the whole welfare system is a runaround and the only way they're going to get help with their kids is to take them to court; in other words, they can't help them unless they reject them. I think the situation is very much like the one that existed for those mothers in Vietnam who brought their children to the orphanages. Those women didn't do that because they didn't love their children, or because they were heartless; they did it because they hoped that their children would get fed and clothed and removed from an intolerable day-to-day existence if they gave them away.

In California and Oregon and now in New Jersey, the fact that structural, policy and technological changes have led to vastly different outcomes with respect to the maintainence of family life, means that, perhaps for the first time in the history of "benevolence" in the United States, we may be looking away from the kind of social services that are in themselves destructive of family life. We instead seem to be looking at the development of service

technologies and systems more capable of working effectively to preserve family life for minority children and the children of the poor and disabled.

The fact that these findings also support the community-based family services concept should be carefully understood (9). The New Jersey studies did not show that every kind of service in such a context was effective. Indeed, some of the social work being done by the catchment-based District Offices originally appeared to be ineffective or negative in effect. What we did find, however, was that less traditional but more appropriate service technologies when supported by appropriate structural arrangements were significantly more effective. Thus, while supportive of the neighborhood personal social service concept, our findings point even more to a need for carefully researched and thoroughgoing alterations in both practice technologies and service structures if such community social services are to become truly effective in helping poor and minority people to maintain or restore decent family environments for children. Given the record established by these studies, there is no longer any reason to believe that social casework, as traditionally organized and practiced, would serve as well. On the other hand, there is also no longer any reason to believe that social services can never be very effective with such families. Clearly they can.

**Implications For Prevention Of Mental Illness**

In Chapter I we cited the extensive evidence that foster care systems have an iatrogenic effect on mental illness and/or crime in the sense that, for example, (a) they may create greater or lesser degrees of disturbance in children, depending on the management and duration of the foster care experience; and (b) they may be related in greater or lesser degrees to later criminal activity, depending somewhat on variations in structure between states. In this study we have looked primarily at data showing differential treatment of minority children and families by social service agencies rather than mental health agencies. We have related differentials in structure to outcomes in terms of restoration to family life and not to mental health outcomes per se. We have assumed that earlier studies are correct and that the improved management of the foster care experience and the resulting earlier restoration to family life are in themselves contributions to the later mental health of the children. However, in doing so we have been inevitably drawn into looking at the differential roles played by public and voluntary agencies under varying technological and structural circumstances. In this respect we have found that the differential treatment of foster children, while it is institutionally and structurally determined, does not occur in a vacuum. In relation to poor and minority communities, the structures determining foster care outcomes may also determine the abundance, character and outcome of other services available. In New York City, for example, a disturbed foster child may receive superb professional mental health treatment designed to help him or her adjust to living in foster care. But precisely because of the priority given foster care in this system, family and mental health services have not been focused at the neighborhood level on assisting his or her family to stay together, and are not available to support the family's restoration. Even in the New Jersey experimental region, such a role for mental health services had to be created both by negotiation and through daily interaction between social services and mental health agencies in each catchment area. Such processes not only do not exist in New York, but the organization to carry out such processes does not exist at the local level.

Recent literature regarding primary prevention in mental health has also pointed to family disruption and separation as a key focus for preventive intervention. In this context intervention strategies generally focus on case finding through contacts with litigants during divorce, separation, custody and support proceedings in family courts. Such strategies, however, are more likely to turn up middle-class White clients. Because property and custody are rarely issues with poor and minority families they use such courts much less frequently. Thus a focus on court processes is less likely to aid minority families. In addition, it is more likely to be too late. Poor and minority children arrive at family court long after an initial family disruption or disability has led to an inability to cope and then later to neglect or abuse

or behavioral problems. The convicts in a 1976 study who had experienced foster care arrived in care on the average six years after an initial family disruption (Gurak 1977).

Preventive intervention in poor and minority communities must, therefore, work in relation to the variety of difficulties and entanglements such families themselves deal with, such as negotiating with welfare, food stamps, or daycare, or in dealing with a neglect case investigation. Thus, the openings for preventive intervention are more likely to occur in the interactions with local child and family and welfare services than in court or in the community mental health center.

For the mental health profession our studies clearly imply that community legal and social service structures may themselves be critical environmental factors in the epidemiology of social pathology. They also imply that the manipulation of such organizational and structural factors may in itself be a critical preventive intervention strategy in dealing with the mental health problems of poor and minority families.

In this context, it is true that the structural manipulations performed in the New Jersey experimental region are relatively minor compared to those that may be required in New York City. But the stakes are also higher in New York. There are very many more children being adversely affected; and the constitutional rights of many more are systematically compromised. Not only is the mental health of more children at risk, but family mental health and social problems are more likely to be neglected in such communities as the result of inappropriate reliance on foster care. Most important of all, however, is the fact that research and experimentation over the past 10 years, as reported in this monograph, have developed the technologies and the organizational strategies capable of changing the situation for the better.

**Constitutional And Human Rights Issues**

While these studies in a sense resolve one human rights issue -- i.e., they establish that there is a systematic pattern of discrimination against minority foster children in New York -- they also raise a number of other issues.

For instance, what we have established is not that such discrimination is the product of individual discriminatory judgments by social workers, but that it is an identifiable consequence of the way in which services are allocated and organized. It is therefore a political artifact. We also have established that many White children and families also suffer inequitable treatment as the result of politically determined differences between agencies and systems, even though in general they are favored when compared with Black and Hispanic clients. And we have found indications that whole communites and indeed the City as a whole may be deprived of services as a consequence.

There are really no natural correctives for this kind of maltreatment. New York children and families cannot really "vote with their feet" by moving to New Jersey. Doctors can be sued for malpractice if they knowingly harm patients by using obsolete technology, but in New York the structures and services are determined by law. To a large extent, the social workers' malpractice in this case is not only sanctified by tradition, but is forced on them by the state. They are powerless to change the system, except via political and possibly legal processes.

These studies were not designed specifically to develop evidence for use in civil rights litigation. To the extent the data are deemed by lawyers to be suitable, it can be assumed that they will be used for evidence, particularly in the current ACLU case Parker v Bernstein. Parker specifically charges discrimination in the processes by which children are sorted into agencies; it seeks to have the state cease applying a religious test in placing children, and cease supporting sectarian agencies. However, our data point to other discriminatory aspects of the current system as well. For example, Black children, in particular, appear to be subject

to a discriminatory pattern in the sense that they are less likely to receive services designed to secure their return to their biological family. Compared to New Jersey of course, all New York children appear to be discriminated against in this respect, and this is the most glaring difference between the two systems. Hispanics suffer somewhat less from the effect of this because their parents are more often active in securing their return. But permanency activity for Blacks and Hispanics is very significantly lower than for Whites, and, even though Black parents are as active as Whites in seeking the return of their children, White children return home almost twice as rapidly.

In theory, it is patterns such as the one just cited, that should bring into play Title VI enforcement under the federal civil rights statutes. Foster care is not only federally funded under the Social Security Act, but many children are also recipients of AFDC Foster Care. Thus, foster care is much more heavily federally funded than education. Although to date Title VI has been used only against discrimination in the field of education, the Department of Health and Human Services (HHS) has the power to seek to enforce it in the field of social services and foster care also. Whether they shall do so, given the current movement toward greater federalism, or whether they may be forced to do so by civil litigation remains to be seen.

### Cost-Benefit Implications

We shall touch only lightly on the cost-effectiveness of such reforms. Fanshel and Shinn (1972) have discussed the advantages at length in their book Dollars and Sense in Foster Care. Our own discussion in this chapter, comparing costs in New Jersey that are less than half those in New York, gives some clue as to the expenditure differentials involved even prior to the introduction of the Permanency Services reform in the remainder of New Jersey. The 35 to 50 percent reductions in foster care achieved by that reform have meant an additional average savings of $212 per month in boarding costs for each child for whom boarding care is no longer needed. This figure would be much higher in New York with $300 per month being the minimum saving per foster child.

The principal benefit in New Jersey, however, is that these reforms have enabled DYFS to shift even more professional and monetary resources to improve preventive and family supportive services in the community, while at the same time making the latter more effective. The potential long-term benefit calculation is beyond the scope of these studies, but must not only include permanent reductions in the costs of institutional and foster care, but also estimates as to the benefits to society from reductions in crime and mental illness.

### Implications For Religion, Charity And Voluntarism

From the above discussion it should not be inferred that we in any way feel that religion, charity or voluntarism are to be faulted. The structure of services, in which these elements interact to produce the current result in New York, is the creature of political decisions made over the course of years, and the resolution of these problems remains a political and legal matter. Nothing in our data indicates that religion, charity or voluntarism could not be elements in a different structure with more favorable results.

With respect to voluntarism, for example, there are a number of alternate models. Voluntary children's service agencies continue to operate in every state in the US. One major difference between voluntaries in New York and those elsewhere, however, is that their roles vis-a-vis the public agencies are reversed. New York City voluntary agencies reject the difficult cases, leaving them for the public agency to care for. Voluntaries elsewhere more often pride themselves on providing the special services needed in the most difficult cases. Children are referred to them when the public agency feels the case is beyond its capacity. Developing services for the most problematic cases puts such voluntaries in the forefront as innovators on behalf of children at a time when foster care is less and less appropriate.

Similarly, religious organizations in New York City will want to rethink their positions regarding their involvement in a system that is not only discriminatory but that tends to de-stabilize families (10). Foster care was a need which religious organizations stepped in to fulfill in an era when there were many orphans and no better alternatives for their care. Now there would appear to be significantly more appropriate roles for churches and synagogues to play, particularly with respect to neighborhood and citizen group involvement in efforts to help poor and minority families to gain entitlements and stay together. Even in the best of systems, the children need such advocates.

## RECOMMENDATIONS

At a fundamental level this analysis strongly indicates the need for New York City to move in the direction of reforms based on the permanency service and community-based family service models. As we have already indicated, the barriers to this are immense. Moving in that direction would mean switching to a catchment area structure, ensuring equality of services across catchment areas, deemphasizing foster care by integrating it into a broad continuum of child and family services, and a complete reorganization of case work services and administration.

In this sweeping form, this translates as a need to reevaluate the utility of voluntary foster care agencies as significant components of the child welfare system. This, of course, is not as malleable a policy option as one might want. This is so not only because these agencies represent powerful vested interests; nor only because the voluntary agencies comprise such a large in-place structure that they would be difficult and expensive to reorganize. Though both of these factors are important, it is also so because many of the voluntary agencies do what they do well. The problem lies not with them but most fundamentally in the system's almost byzantine fragmentation and complexity. Some agencies are good at placing children in adoptive homes, others are good at providing various forms of therapy. While the use of the words "all" or "none" may be risky, one would not be too far in error to claim that none provide the overall spectrum of services that would best serve children and families in the neighborhoods where they live. Even if one or a few such agencies did exist, that would not ameliorate the basic problem: i.e., the system discriminates to all intents and purposes against everybody in New York, but especially against minority children and families, and no one has the power to reform it except the state legislature and the federal courts.

We have pointed out in Chapter 2 that power and authority in child welfare are so cut up and distributed, and so bound up with checks and balances at every level in New York State, in general, and in New York City in particular, that no one at any level has sufficient power to mandate the changes needed to restructure, not even the Governor. Historically, the consequence of this has been that no one has been willing to admit that the emperor has no clothes, that he has no power, and therefore no one has tried. Band-aid approaches are all that have been possible.

It is for this reason that we have come to the conclusion, reluctantly, that restructuring must be ordered either by the federal courts or by the New York State legislature. The process may require the appointment of a temporary commission or a federal master. Ultimately, however, the New York State Commissioner of Social Services must be given sufficient power to accomplish structural changes, as these will undoubtedly be necessary to improve the productivity of social services not only now but in the future. The alternative to a state takeover is continued rigidity.

There are any number of alternative scenarios for the accomplishment of the restructuring we recommend. Fiscal problems alone will make this a very complex process to plan. The shifting and retraining of personnel and the transfer of cases are all complex project planning problems. At this time, we can only summarize some of the principles involved and sketch out some possible steps toward accomplishing such a restructuring.

**Principles**

All possible steps must be taken to eliminate differential placement and processing patterns by ethnicity. Religious identification should not be a placement criterion because it leads directly to disproportionate placement of ethno-religious minorities in poorer agencies. Agencies also should not be permitted to select the cases that they wish to serve. This selectivity leads to a creaming of White and easier to handle cases by the better agencies. Random placement would solve this problem, but would have a significant positive impact only if the services provided by all agencies were vastly improved.

A catchment area solution in which the public or voluntary agency responsible for a catchment area functioned as a unified whole rather than as a set of specialized autonomous bodies would clearly provide the most fruitful preliminary basis for service improvement. This is so principally because such a system appears necessary if a broad continuum of services integrating foster care with family support services is to become viable on a non-discriminatory basis.

The catchment area solution also would facilitate close-to-family placement which in turn would facilitate the integration of services. Even lacking a catchment structure, closer-to-parent placement standards must be implemented in order to facilitate some form of integration of family services. By catchment area structure, it is not meant that a catchment area should be a county. Community Board and other catchment area designs already exist within the city. Clearly issues of optimal geographic and population size would have to be considered.

Purchase of services from voluntary agencies, other than for voluntary neighborhood family services, should be limited to highly specialized services for which neighborhood programs are not suitable. This might include special needs adoptions, care of the severely disabled, and special therapy services, as it does in other states, but not foster care.

The service delivery system at the neighborhood level should be carefully designed to place foster children under the jurisdiction of permanency services, not foster care units, and to create the supporting structures for goal-oriented, time-bound casework with families such as is outlined in Appendix A. Administrative and executive structures to support the new organization of tasks at the operating level, would replace current administrative structures.

**Some Steps Toward The Fulfillment Of Principles**

The following list provides a possible agenda for planning the restructuring of services. It must be emphasized that this list is not concerned with a restructuring of foster care services in isolation, but with a restructuring of all child and family and related social services. Comprehending this as an important goal, we believe, is more desirable than agreeing with the specific utility of this list.

- Set a timetable for planning and change.
- Begin research and planning process immediately.
- Re-evaluate roles of all agencies, voluntary and public, including roles of related health, welfare and juvenile justice agencies.
- Evaluate merits of alternatives for catchment and non-catchment based redistribution of services to client communities or groups.
- Develop goal-oriented specifications for youth, family and related services with respect to client communities or groups. Using the New Jersey model, design functional task specifications for operating levels of organization.
- Reorganize administrative levels completely to provide leadership and support to functional reorganization at operating levels.
- Plan retraining and resystematization to implement permanency services technology and restructuring of tasks at every level.

- Evaluate merits of voluntary and/or public organizational alternatives to meet specifications. If appropriate, invite voluntaries to bid (on RFP basis) for specified purchase-of-service opportunities in catchment or other service areas.
- Assume direct government payment of reimbursements to foster families. Reimburse voluntary agencies for specified and planned family social services only, not foster care.
- Develop CCRS monitoring of activity and milestone rates (including exits) for all youth and family services. Specifically develop analytic tools to monitor unequal treatment of minority children and families.
- Develop and adopt a legislative package, recodifying Social Services Law, Family Court Act, Corporation Law, and others, as appropriate to support above changes.

## FOOTNOTES

1) A congregate institution in foster care is essentially an orphanage. But the concept also includes group homes and group residences -- modern alternatives that are characterized by lower density. Group homes and residences usually contain from five to fifty children.

2) For a more in-depth examination of the concept of structural discrimination see Unnever, 1980.

3) "Performance Contracting" as used here refers to techniques developed in the Alameda County (California) project and described in Stein, Wiltse, Gambril (1974) and in Regional Research Institute (1978). Based on behavioral principles, after negotiations with parents, a written contract is developed covering both what the parent and the agency will do as part of a plan for maintaining or restoring the child. A parent might contract, for example, to go to AA regularly for six months, visit the child on Tuesdays and Saturdays, acquire an apartment with a separate room for the child, etc. A timetable and a follow-up reporting schedule enable the worker to verify progress or, if there is no fulfillment, to document this also. Parents are informed that adoption is an option the agency must, under law, pursue if the parent fails to plan for the child. Even though the contract is not a legal instrument, the record with respect to fulfilling such commitments may often be accepted by judges as meaningful evidence with regard to an action to sever parental rights. "Systems Intervention" techniques place the social worker in an advocate's role, interceding for the clients with other agencies and in the community (i.e., with the "system"). This is done to secure entitlements, such as public welfare, or help, such as tutoring for a child, or even just friendly concern from a neighbor, if such is needed for family restabilization.

4) Using the May 1979 CWIS data file we selected a sample of 1235 children. For these cases the goal was to examine their case files in order to code process and outcome data. These data were then to be combined with the CWIS file data. In 282 cases, 23% of the toal sample, our staff was unable to locate files of children. Nor was agency staff able to locate the files. These missing files were not adoption cases since sealed adoption files were handled differently. Since we have the CWIS data on these 282 cases, it has been possible to assess the factors associated with having one's file missing. First, there is no relationship with ethnicity. Cases with missing files had been in care approximately 12 months longer than those for which files were located and were less likely to have serious disabilities. Little difference in family and child reasons for placement exists except for a slightly higher incidence of no reason being recorded for the missing files CWIS data record. This appears to indicate that missing files are missing due to laxity in record maintenance procedures rather than other factors. A missing record is most probably a file that is circulating somewhere in an agency. That is, it is lost in the sense that until a worker or administrator returns it, there is no easy

way to determine its location. Of the various agencies children are placed in, missing records were substantially more likely to occur in two large Catholic agencies. Since the missing files do not differ systematically from the completed records, no bias would appear to result from their exclusion from the analysis (if we view the analysis as a survey, a completion rate of 77% is quite respectable). While we have the CWIS data on the missing cases, we do not have most of the process or outcome data. Consequently these cases are lost for the analysis. The most unfortunate aspect of this loss, for the analysis, is the reduction in levels of statistical significance caused by the smaller number of cases.

5) Among entry-level factors not included in the analysis are: socioeconomic status and family structure (including factors such as whether both parents were present) and number of siblings). Most of these factors cannot be ascertained from the CWIS data or case records. The CWIS data contain an item on household income but in the vast majority of cases these data were missing. Number of siblings was coded; it was deleted from the analysis because it proved to be unrelated to the other analytic variables. Basic family and household structure data are not available. This data gap is not as large as it may seem: SES and family structure would only be of interest if they caused a particular problem. These problems are reflected in the family and child reasons for placement -- variables which are more direct indicators of problems than SES or family structure. We would, of course, like to have more complete background data because broad background factors can communicate intangible, difficult-to-report factors. Nevertheless, from a policy point of view, activity should be based on concrete problems rather than social categories.

6) One might argue that the classification of agencies into categories ranked in terms of exit rates involves a degree of circularity. That argument would be something like the following. Agencies with the lower exit rates have those lower exit rates because they have cases with considerably more problematic backgrounds. Minorities are not tracked into such agencies, rather minorities present agencies with considerably more serious problems and this causes the agencies to be less successful in arranging exits. While such a pattern is theoretically possible, this analysis indicates it to be highly improbable for the following reasons. First, minorities have differential placement patterns after controlling for entry-level characteristics. While those controls are not ideal, they are more than adequate. Second, as demonstrated in Table 3, Low Exit agencies have a considerably lower rate of permanency activity and, indeed, of any type of activity than do High Exit agencies. This indicates that the agency categories differ in terms of their basic processes. The small difference between High and Medium Exit agencies suggests that these two categories are more similar than different. Though that similarity is in part due to the arbitrary cut-off points used to trichotomize the data set. Above all, it should be noted that in theory agencies with more difficult caseloads should have higher rates of activity per child. Yet the opposite is true in New York City.

7) Perhaps the most precise way to describe the joint effects of ethnicity and religion in agency placement is to utilize unified ethno-religious categories such as Black Protestant, Hispanic Catholic and White Protestant. The agency placement regressions were recomputed with seven such categories replacing the two ethnic and three religous categories used in the equations summarized in Table 6. While these new results do not contradict those already reported they do provide some subtle insights. Blacks are less likely than Whites to be placed in High Exit agencies regardless of the religion of the Whites or Blacks involved in the comparison. However, Black Protestants and Black Catholics have a lower probability of such placement than do Blacks with no religious identification. Hispanics, Protestant and Catholic, have a very low probability of such placement in a High Exit agency. Among Whites, religion makes little difference: they have a high probability of placement in such agencies. Blacks are considerably more likely to be placed in Medium Exit agencies than are Whites, regardless of religion. However Black Protestants are the least likely among Blacks to be so placed. Hispanics are the most likely of all groups to be placed in Medium Exit agencies, but Hispanic

Protestants have a much lower probability than do Catholics. Among Whites the differences are insignificant. The probability of a Black Protestant being placed in a Low Exit agency is almost twice that of a Black Catholic. Both are more likely than Whites of any religion to be so placed. The probability of a Hispanic Protestant being so placed is almost four times that of a Hispanic Catholic. In fact, the Hispanic Catholic probability of placement in a Low Exit agency is not significantly higher than that of Whites. Whites have low probabilities of placement in Low Exit agencies regardless of their religious identification.

8) To some the results presented in Table 19 may seem to be contradicted by those of Table 20. The contradiction is more apparent than real. Table 19 indicates, as described in the text, that controlling for type of agency does not eliminate the ethnic effect on the probability of returning home. Table 20, however, demonstrates that the type of agency does make a difference since there is no ethnic differential in the fully implementing counties, and ethnic differentials do exist in the other counties. As explained in the text, the results presented in Table 19 merely indicate that there is no tendency for members of any ethnic group to reside in the catchment areas of one type of agency or another. We chose not to complicate the presentation by including a formal test for interaction, but there is interaction between ethnicity and agency type with respect to return home probabilities. That is, the probability of returning home for Blacks varies across types of agencies in a way that is different than for Whites. This fact is demonstrated in Table 20. It could also be demonstrated by computing separate equations for Blacks and Whites when presenting the data in Table 19 (or by using multiplicative interaction terms). For our purposes the point is made adequately, and perhaps more simply, by means of the combined information presented in the two tables.

9) For an excellant treatment of one form of community based therapy in a core inner-city area (the South Bronx) see Farber and Rogler (1981) and Eismann (1982).

10) In particular, if one confronts the fact that development of catchment-based family services is a necessity, and tries to think out how such a change could be implemented in New York City, one is immediately struck with the fact that some of the primary obstacles are the laws and customs which mandate the use of religious sectarian agencies for child care services in New York. Indeed, these laws alone go far toward explaining why New York City has not already created a catchment-based family social service system. It can be argued, of course that this does not logically follow, and that religious organizations, equally as much as public agencies, could be commissioned to provide neighborhood family services in defined catchment areas. While literally true, however, this possibility in the U.S. is both administratively infeasible and constitutionally questionable. With respect to other community services, such as Day Care or Head Start or Youth Employment, there is reason to believe that religious organizations may operate in an impartial and non-sectarian manner, and that there need be no bar to their participating, as do other voluntary organizations, in such publicly funded programs. But with respect to youth and family services, another set of considerations comes into play. This is because such services by their very nature involve sensitive interventions in family life; interventions in which religious values are much more likely to conflict with professional values and/or public policy. If, as is administratively reasonable, only one such organization were so commissioned in each area, there are many that would say that this would constitute an obvious establishment of one sect in preferrence to all others in that area. But, in this case, such an "establishment" becomes an issue not only because one sect's agency is selected over others, but because that sect's agency is entrusted with the State's power to intervene in family life and to make life decisions affecting family members under the general legal doctrine of Parens Patriae. Since sects vary especially with respect to concepts of family life, sects not so favored would rightly object to the investment of such power in the agency of a sect with whose family values they disagree. Picture, for example a Catholic or a Protestant agency conducting investigations of abuse or neglect, and making decisions regarding the removal of children from Pentecostal or Jewish families; or vice versa. Imagine the opening this

would create for lawyers to challenge such social work decisions in the courts. Thus, to even approach being non-discriminatory, every applicable sect would have to have an agency in each catchment zone, and even then the system would still discriminate against the unaffiliated and against the members of unstructured sectarian movements, such as the Pentacostals, who still would not be served by co-religionists. In any case, to have even the three major sectarian divisions represented in each catchment zone, would create an administrative nightmare. It is much easier to continue the current system of limiting the sects to the foster care segment of services on an at-large rather than catchment basis, so that they may continue to be utilized as required by law.

On the other hand, if the City were not forced to rely on sectarian agencies, it could direct the organizational placement of either voluntary or public non-sectarian services at the neighborhood level so as to work with children and families more appropriately. It may be argued that the City could do so anyway by setting up all such services on the local level, with the exception of foster care, and by then relying on such preventative and family restoration services to gradually dry up the supply of foster children going to the at-large agencies. To do so, however, would require a very large initial investment, plus the creation of a new and very large family services budget. Even then the result would be much less than satisfactory, since the local permanency services unit would have limited access to the children and foster families. They would be in the position of having to constantly negotiate every life decision for a child and/or family with the agencies that had custody of the children. This is an intriguing possibility, and would gladden the heart of any ambitious, would-be bureaucratic empire builder, but it is not likely ever to become feasible since it would be prohibitively costly from both the financial and the political point of view. Only if it were given the power to reallocate present resources and restructure the present system, rather than creating an additional new system, could the City afford to even begin to do an adequate job of creating local family services. But this means that, at a minimum, the City would have to be able to reallocate and restructure budgeted social services currently provided by the voluntary foster care agencies, and, as we have seen, this is an option that is not really open to the City as long as it is required by State law to rely on sectarian agencies for foster care.

The consequences of this are, of course, formidable. As we have seen, the absence of neighborhood social services is also the key obstacle to implementing more appropriate preventative and family restorative services for children in minority communities. At the same time, the independence and at-large character of the foster care agencies virtually guarantees that such children will be removed to a distance and lose connections with their families. Thus, the City's being forced to rely on sectarian organizations in itself creates a situation which has the unfortunate consequence, from a religious point of view, of encouraging the dissolution of families. For families in Black ghetto communities, especially, this is a "Catch 22" situation. Members of more established sects, Catholics, Jews and members of some Protestant denominations, often have access to religious or ethnic-based networks of support via their clergy or cultural organizations, which may work in tandem with the denomination's foster care agency, to provide the equivalent of supportive services so as to avert placements or facilitate some family restorations. But there are no Abyssinian Baptist or Islamic or Pentecostal foster care agencies, or any others that are connected with ghetto cultural and religious networks; and such ghetto networks therefore lack the support that is provided by the City via foster care funding to the networks of the more established sects. To whom, then, may a Black family turn? If the forced reliance on sectarian agencies blocks the City from creating a delivery system more appropriate to family needs in poor and minority communities, this also, in effect, forces such families to place children in the care of religiously, ethnically and/or culturally alien agencies, and to leave them there, since services are also unavailable to help the family get itself together. And this occurs precisely because, as a direct consequence of sectarianism, local services are unavailable.

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# APPENDIX A

## COMPARISON OF TWO TASK STRUCTURES

| A. OPERATING LEVEL | MODEL A | MODEL B |
|---|---|---|
| Practice Orientation | o Stability of foster care services; low case turnover rates. | o Productivity of permanency case-work; higher case turnover rate. |
| Case Goal-setting | o No goals; goals deferred; "paper goals"; openly long-term goals; or:<br>o "Return home" considered to virtually exclude adoption alternatives; or:<br>o Ostensible permanency goals in operation secondary to goals of stability, "therapy" and/or status-maintenance. | o Permancy goals explicit; and<br>o Adoption contingency also guides return home casework at least informally; and<br>o Permanency goals have operational priority over non-permanency objectives. |
| Case Planning | o No case plan; "paper" plan.<br>o Little or no plan articulation:<br>o inadequate diagnosis or problem definition,<br>o no benchmark objectives,<br>o no time frames,<br>o no contingency planning.<br>o Unrealistic planning, e.g.:<br>o no bio-parent commitment.<br>o services not committed or not available in time frame.<br>o plan not consonant with problem.<br>o Harmful planning:<br>o protracted impermanency is planned inappropriately. | o Formal and informal planning are more evident.<br>o Plan is somewhat articulated, at least in terms of problem definition, some bench marks. Best plans included time-frames and explicit contingency planning.<br>o Planning is usually more realistic, based on the problem and the resources and time available.<br>o Plans include bio-parent and/or resource commitments on record.<br>o Less harmful planning: long-term care or treatment are considered exceptional plans requiring professional clinical evaluations or unusual documentation. |
| | Overall impression: planning omitted or inappropriate, based on no or low expectations of permanency outcomes, and/or negative feelings about both bio- and adoptive parent alternatives. | Overall: planning more likely to occur based on expectation of some successes, and ability to deal with ambivalences. |

| | | |
|---|---|---|
| Case Recording | o Recording is generally spotty, ambiguous, circumstantial and/ or confused.<br>o Frequent omission of any detail relevant to progress toward permanency, parental planning, etc.<br>o Often omits recording of evidentiary detail which might stand in court.<br>o Recording often fulles: with regard to non-permanency goals such as "adjustment in care," stabilization of placement, para-parental interventions and judgements of worker, or justifications for non-return of child. | o Recording is adequate to full<br>o Recording more often relates to case goals and permanency planning.<br>o Legally significant detail is carefully recorded.<br>o Workers' recording relates directly to planning and to actions fulfilling plan and benchmark objectives, giving relevant detail and documentation. |

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| A. OPERATING LEVEL (continued) | MODEL A | MODEL B |
|---|---|---|
| Casework Repertoire | Caseworker activities, in addition to being more often centered on stabilizing cases, evidence more limited use of options. Primary repertoire in evidence includes:<br>o Emergency interventions and unplanned placements.<br>o Routine foster home visits.<br>o Service interventions and negotiations on behalf of foster familes with regard to health, education and payment problems.<br>o Para-parental interventions on behalf of the child vis-a-vis: foster family, school, clinic, etc.<br>o Transportation of children to appointments.<br>o Pseudo-clinical interventions in child/foster family relationships.<br>o Investigation and documentation to justify continuation of child in care.<br>o Emergency supports to foster family.<br>o Interviews and counseling with bio-family.<br>o Clerical duties. | Caseworker more likely to delegate low-technology tasks to foster family, clerks, aides or volunteers. Richer reperto. es are more often discharge-oriented and more frequently include:<br>o Planned placements and replacements.<br>o Case investigations and planning including diagnostics, evidence-building, negotiation of plans with bio-parents, clinicians, etc.<br>o Permanency-oriented service interventions on behalf of thechild and/or bio-parents with the foster family, clinic, legal, adoption, AFDC, or other resources.<br>o Supervision of aides and clerks.<br>o Preparation of evidence and documentation for court.<br>o Case reviews and prioritizing.<br>o Bird-dogging performance of parents and resource-people.<br>o Development of resources needed to fulfill case plans.<br>o Pursuit of court processes.<br>o Preparation of children (and bio- and foster families) for return home or adoption.<br>o Oversight of permanency placement activities and post-placement supports.<br>o Case closings and discharges.<br><br>In short, the repertoire in the higher technology units gives some evidence of permanency casework "know-how." |

| | | |
|---|---|---|
| Use of Resources | o Low frequency, low range.<br>o Passive referral and acceptance | o More frequent, wider range.<br>o Negotiatory, active, developmental, demanding of performance. |
| Use of Paraprofessionals | o Developmental, unplanned. | o Instrumental, planned, directional. |
| Client Relations (bio-familes, foster families, children) | o Frequently unclear, misleading information given.<br>o Not contractual.<br>o Often ignores clients' role in permanency planning.<br>o Avoids alternatives and consequences.<br>o Sets up no expectations, or unrealistic expectations and hopes.<br>o Encourages dependency in the "helping relationship" | o Fuller, more realistic communication.<br>o Contractual (formally or informally).<br>o Engages participation in permanency planning.<br>o Openly explains alternatives and consequences.<br>o Sets up expectations and alternatives, including time-frames, for permanency.<br>o Expects growing independency. |
| Worker Participation in Practice Control Functions | o Tends toward minimal participation through routine reporting, requests for supervision, guidance, normative acquiescence. | o Tends toward primary responsibility for planning, review and control in own cases; instrumental use of "system" to further case goals; resentment of irrelevant controls or supervision. |

| B. SUPERVISORY LEVEL VARIABLES | MODEL A | MODEL B |
|---|---|---|
| Control Orientations | o Stability maintenance.<br>o Compliance<br>o Staff and budget maximization. | o Goal Achievement.<br>o Accountability. |
| Supervision: | o Tends to "clinical supervision." or "bureaucratic" models. | o Clinical and bureaucratic roles more often delegated to specialists (lead worker, consultant, clerk)."Management models" more likely. |
| | o Direct supervision focuses on case-detail handling, personal problem solving and normative conformity of worker. | o Supervision more likely to focus on performance goal setting, planning and progress evaluation, rather than personalities. |
| | o Supervisory roles characteristically limited in scope, primarily to "downward" authority roles vis-a-vis workers and clients; "defensive" relations with outside resources and higher authority. | o Supervisor more frequently plays interface, facilitator, resource or expeditor roles vis-a-vis contextual resources and higher authority, so as to support unit and worker's goal attainment. |
| Training | o Training hierarchic/normative.<br>o Training primarily by supervisory involvement and norm-setting within cases and during case conferences.<br>o Focus on analytic/psychodynamic and stability-maintenance aspects of family casework, not planning, repertoire or accomplishment. | o Training collegial/instrumental.<br>o Training less in case conferences, more via review, consultation, referral and formal classes by other experts.<br>o Focus more eclectic and instrumental than analytic/normative, includes case planning and repertoire skills such as resource development, system negotiation, legal procedures. |
| Control Techniques and Systems | o Personality evaluations and normative sanctions<br>o Incident controls: e.g.:<br>o Minimum visit schedule monitoring.<br>o Expense and time monitoring.<br>o Contact sheets.<br>o Management Information Systems forms.<br>o Reviews of recording. | o Performance evaluations and replanning requirements.<br>o Practice integrated controls (see below) |

- Little or no integration of controls with casework practice.

- Integration of controls with casework through:
  - Time-bound case planning.
  - Review and approval of case plans.
  - Periodic review of progress.
  - Primary exception-control procedures to:
    - Identify lagging casework.
    - Require re-replanning.
    - Trouble-shoot on case difficulties.
    - Resolve ambivalences.

- Paperwork and fiscal barriers against permanency supports such as day care, homemakers, subsidies, medical reimbursements combined with:

- Facilitation of supports via negotiated procedure simplification, para- and clerical aids, etc. Combined with:

- No barriers to extension of foster care.

- Barriers to extension of foster care, e.g.:
  - Progressively stringent reviews of plan extensions.
  - Extensive documentation requirements for LTFC.

- Few or no mechanisms for resolving workers' ambivalences and goal conflicts.

- Mechanisms for ambivalence resolution, e.g.:
  - Contingency planning and recording.
  - Second opinion procedures.
  - Review conferences, group critiques or "rounds."
  - Informal adjudication processes at supervisory levels.
  - Case transfers.
  - Formal adjudication procedures.

| C. ADMINISTRATIVE AND SYSTEM LEVEL VARIABLES | MODEL A | MODEL B |
|---|---|---|
| Orientations | o "Growth" and stability orientations.<br>o Fiscal and "incident control" goals. | o Performance-oriented with respect to permanence.<br>o "Shrinkage"-oriented with respect to current in-care caseloads. |
| Control Configurations | o Authority centralized -- power decentralized.<br>o Accountability at the top. | o Authority integrated with level of decision-making.<br>o Accountability at every level. |
| Control Priorities and Functions | o Primary focus is control of peripherals and incidents of organization; emphasizes, e.g.:<br>o Expenditures control.<br>o Budget justification.<br>o Oganization, staffing and status controls.<br>o Resource rationing.<br>o Control of public relations. | o Managerial control reinforces practice control and performance by:<br>o Setting performance goals<br>o Providing resources and authority consonant with goals.<br>o Contributing to development of practice and practice control technologies at all levels.<br>o Dealing with case exceptions identified through "bottom-up" processes.<br>o Negotiating for resources to support casework goals.<br>o Evaluating performance regularly. |
| | o Ambiguous or contradictory expectations and directives, e.g.:<br>o "Pursue permanence but cut use of daycare and homemakers."<br>o "Organize permanency casework in out of home services unit." | o Consistency regarding organization, technology and resources required to meet goals. |

| | | |
|---|---|---|
| Control Techniques and Systems | o No or little or misleading policy guidance on case decision-making, e.g., no policy and procedures manual, ambiguous directives, etc.<br>o Primarily fiscal and personnel control systems, or:<br>o "Management Information" and "Case Information" systems which do not feed back into practice and practice control decision-making so as to optimize same.<br>o Periodic case review systems which:<br>o Decrease worker accountability.<br>o Set over-wide parameters for performance.<br>o Create ambiguity and ambivalences.<br>o Provide inadequately for ambivalence-resolution.<br>o Reinforce authority/power dichotomies.<br>o Create further delays for negotiation of case decisions | o Clear permanency oriented guidelines for practice.<br>o Information system informs decision makers, particularly workers and supervisors, about performance in relation to goals, status of cases, etc.<br>o Review systems based on:<br>o Primary accountability of worker for planning, review and decision-making.<br>o Short-interval planning and performance review.<br>o Exception only review through the supervisory pyramid.<br>o Ambivalence-adjudication at each level.<br>o Clerical controls to insure tracking and timeliness. |

## Appendix B

## DICTIONARY OF PRINCIPAL VARIABLES USED IN THE ANALYSIS

A fairly extensive set of measures is utilized in this analysis. As each is introduced, it is defined in both substantive and operational terms. Nevertheless two factors render this dictionary necessary: (1) Variables are introduced at different points of the analysis making necessary a mechanism for quick reference. (2) Only brief variable titles are used in the tables due to space limitations. In the text we usually refer to variables in substantive terms and place the titles in parenthesis when clarification is needed. This provides a good indication of the content of the measure and gives the reader the ability to quickly locate the variable in a given table (through the title). Nevertheless, ambiguity in the meaning of a given measure can creep into the reader's interpretation of text and tables. Consequently, it is recommended that one refer to this dictionary whenever in doubt concerning the exact meaning of a measure.

In Chapter 3 we develop an analytical framework which guides the analysis. The framework focuses attention on three levels of analysis: entry-level characteristics, process variables, and outcomes. The rationale for this model is discussed in detail in Chapter 3 and is developed further in the remainder of the monograph. Here that framework is used to organize the dictionary. Consequently variables are presented within the category that they principally belong to. When a measure might be conceptualized as belonging elsewhere under certain conditions, that fact is mentioned. Most measures have been developed with reference to the New York City data. That data set has stronger analytical potential than the New Jersey data, though the latter does provide a reasonable ability to measure entry-level characteristics and outcomes at the case level. When differences in specific measures characterize the New York and New Jersey data, that fact is noted here.

I. Entry-Level Characteristics.

A. Ethnicity. All individuals are coded as belonging to one of three groups. (Figures in parenthesis refer to New York City data).

1. WHITE: Coded '1' if CWIS record indicated individual was White (13.5%) or other non-Hispanic, non-Black ( 2.5%).
2. BLACK: Coded '1' if CWIS record indicated that individual was Black (60.7%) or interracial (3.3%).
3. HISPANIC: Coded '1' if CWIS record indicated that individual was Puerto Rican (19%) or other Hispanic (1%).

B. Basic Individual Characteristics.

1. AGE AT PLACEMENT: Age in months at time of entry into foster care (coded from case record).
2. SERIOUS DISABILITY: Coded '1' if individual's record indicated a severe degree of either physical, learning, or socio-emotional disability (coded from case record).

C. Family Reasons for Placement. A series of dichotomous (0 or 1 code) variables coded from the CWIS record.

1. PARENTAL SURRENDER: Coded '1' if individual's parent had died, abandoned or surrendered child.
2. PARENT-PROBLEM: Coded '1' if parent problem was given as one of the following: mentally defective, alcoholic, drug addict, arrested, in prison, or if child abuse was involved.
3. PARENT-COPING: Coded '1' if parent problem was given as one of the following: "unable to cope," inadequate housing, inadequate finances, parental conflict, sibling conflict, or parent-child conflict.
4. PARENT-REQUEST: Coded '1' if placement was due to a "family emergency," physical illness of the parent, hospitalization of the parent, or a plain request by the parent.
5. NEGLECT: Coded '1' if family reason for placement was neglect of the child.

For New York City, the above categories represent the entire range of family reasons for placement. In New Jersey, however, only one reason for placement (family or child) was given. Consequently the child reason variables for New Jersey differ as indicated from the New York codes. Also, while in New York a child could have both a family and a child reason for placement, that is not the case in New Jersey.

D. Child Reasons for Placement. For New York, these are coded from the CWIS record. For New Jersey, they are coded from case records.

1. NO CHILD REASON: Coded '1' if no child reason for placement given (New York only).
2. CHILD REASON: Coded '1' if some child reason for placement given (New Jersey only).
3. PHYSICAL OR MENTAL CHILD REASON: Coded '1' if physical or mental problems of child noted as reason for placement (New York only)
4. OTHER CHILD REASON: Coded '1' if school, home or community behavior of child cited as reason for placement (New York only).

E. Indicators of Family Involvement in Case.

1. PARENT INITIATIVE: Coded '1' if any permanency activity was initiated by a parent or surrogate (from New York case records).
2. PARENT CONTACT: A count of the number of contacts, at any location, that had occurred between parent and child (New York CWIS record).

F. Individual Religious Classification

1. CATHOLIC: Coded '1' if individual listed as Catholic.
2. PROTESTANT: Coded '1' if individual listed as Protestant.
3. JEWISH: Coded '1' if individual listed as Jewish.

4. OTHER RELIGION: Coded '1' if other or no religion is indicated.

Other entry-level variables, such as sex, or components of disability are sparingly used and adequately defined in the text.

II. Process-Level Variables.

The second level of the analytical model refers to actual processes (such as types of activities) or to implied activities (such as tracking or placement patterns based on case locations). In the latter case, a location does not become a process except when analyzed in a dynamic mode. Here we only list the component variables. It should be noted that several variables which are listed elsewhere could be considered process variables even though we feel they primarily belong where we list them. One example would be MILESTONE RATE (viewed as an outcome); another example is PARENT INITIATIVE or PARENT CONTACT which are treated as indicators of family orientation towards the child.

A. PERMANENCY RATE: The number of PERMANENCY ACTIVITIES accomplished per month in care during the interval from June 1978 to May 1980 (New York case records).

B. PERMANENCY ACTIVITIES: The actual number of activities accomplished (June 1978-May 1980) that were considered directly related to exit into a permanent family environment -- either return home or adoption (New York case records).

C TOTAL ACTIVITY RATE: Number of casework activities per month as in the case of PERMRATE (New York Case Records).

D. TOTAL ACTIVITIES: The total number of activities recorded in the New York case records. Any type of activity, including permanency activities, was counted New York Case Records).

E. HIGH EXIT AGENCY: Coded '1' if the agency in which a case was placed was any one of the 20 agencies with the highest exit rates (approximately one-third of caseload). (From New York CWIS record and case records).

F. MEDIUM EXIT AGENCY: Coded '1' if the agency in which a case was placed was any one of the seven with the second highest cluster of exit rates (about one-third of caseload). (New York CWIS record and case record).

G. LOW EXIT AGENCY: Coded '1' if agency in which a case was placed belonged to the cluster of agencies with the lowest exit rates (just under one-third of caseload). (New York CWIS record and case records).

The above three variables (E-G) are the principal agency variables of concern to this analysis. We do, however, examine to some extent the correlates of placement in more traditional categories of agencies (see Tables 13 and 14 in Chapter 4). The traditional categorization divides the voluntary agencies into four groups: Catholic, Protestant, Jewish and non-denominational. A fifth group consists of the city or SSC offices.

Numerous other process variables were examined. They are not emphasized because they were either found to be unreliable (as in the case of case goals), or they were found to be unimportant for the analysis in the sense of insignificant relationships with key variables (as in the case of the number of placements).

H. Three additional agency variables apply to the New Jersey data only. Each is coded '1' if a particular modality of the new permanency technology being introduced in New Jersey had been implemented.

1. FULLY IMPLEMENTING: Coded '1' for district offices in which the permanency procedures had been fully implemented.

2. PARTLY IMPLEMENTING: Coded '1' for district offices in which a modified implementation occurred.

3. MINIMALLY IMPLEMENTING: Coded '1' for district offices in which there was no or minimal implementation.

III. Outcome Variables.

Outcome variables measure the extent to which a child has moved through the system or exited.

A. DURATION: The total number of months in foster care (New York CWIS and case record, New Jersey case record).

B. MILESTONE RATE: The number of milestones towards exit achieved per month in care during the period from June 1978 to May 1980.

C. MILESTONES: The actual number of milestones towards adoption or towards return home achieved during the June 1978 to May 1980 period. Nine distinct milestones associated with return home could have been coded from the case record (New Jersey and New York case records). These are:

1. Plan established by agency
2. Plan submitted to city.
3. Return home plan approved.
4. Family contract established.
5. Family contract fulfilled.
6. All other preparatory steps completed (e.g., welfare arranged, trial visits).
7. Approval by courts, others, if applicable.
8. Child returned to family/trial return to family.
9. Final discharge.

Thirteen distinct milestones associated with adoption could have been coded from the case records.

1. Adoption plan established in agency.
2. Plan submitted to city.
3. Plan approved by city.
4. Adoption explored with foster or extended family, if appropriate.
5. Surrender taken.
6. Legal department submits information to lawyers.
7. Legal papers filed.

8. Legal steps completed, child freed.
9. Search/identification of new adoptive family.
10. Placement preparation and processing complete.
11. Placement and supervisory period with new adoptive family begins.
12. Finalization papers completed.
13. Legal adoption.

D. EXIT-HOME: Coded '1' if it was determined from the case record (New York and New Jersey) that the child had returned home. If an exit milestone (returning home) equal to '8' or '9' was achieved, the event was coded as a return home.

E. EXIT-ADOPTION: Coded '1' if it was determined from the case record that an adoption exit had occurred. If an adoption milestone coded '10', '11', '12', or '13' was achieved, the event was coded as an adoption in New York. In New Jersey, transfer to a specialized adoption unit is coded as adoption. Only EXITRH is completely comparable between New York and New Jersey.

F. EXIT: Coded '1' if either EXIT-HOME or EXIT-ADOPTION were coded "1".

To the extent that other variables are referred to in this monograph, they are defined in the text. The list presented in this appendix represents the core analytical variables.

## APPENDIX C

## MULTIVARIATE CONTROL PROCEDURES

## AND STATISTICAL CONVENTIONS USED IN THE ANALYSIS

Central to the analysis reported in this monograph has been the need to determine the extent to which differences between ethnic groups in key outcomes (such as duration in care and the various modes of exit) were due to entry-level characteristics or process-level factors. This need requires a statistical control procedure. By statistical control is meant the process of rendering equal, for all groups, their distributions of the variables to be controlled. This control process is widely understood when executed or presented in the form of cross-tabulations. A basic (hypothetical) example might underline this point. The difference in the rate of exit found to exist for Group A and that found for Group B might be due to the differences between Groups A and B in the proportion of each group which has serious physical disabilities. If that proportion is higher for Group B and it is arguable that exit is more difficult for those with serious disabilities, then Group B's lower exit rate would be due to this difference in the distributions for disability of the two groups. Using cross-tabulation procedures, one examines this possibility by comparing exit rates of each group broken down by level of serious disability as in Table C-1.

The data presented in Table C-1 are hypothetical. The analytical goal is to use the tables in order to determine the extent to which Group A's higher exit rate (46 percent as compared to 30 percent for Group B) can be attributed to the lower incidence of serious disability found in Group A (10 percent as opposed to 50 percent in Group B). To do this the reader must compare distributions of exit within categories of Disability Status across groups. Part 1 of Table C-1 demonstrates a situation in which controlling for different levels of serious disability does not explain the difference in the exit rates of groups A and B. In group A, 47 percent of those with low level of disability exited, whereas 50 percent of those with low disability in Group B exited. This is a small difference in the rate of exit within a specific level of disability. More significantly, of those with high levels of disability 40 percent who were in Group A exited while only 10 percent of those in Group B exited. The existence of different rates of exit within categories of the control variable provides one clear example of a relationship that persists after the application of controls.

Part 2 of Table C-1 demonstrates a hypothetical cross tabulation which would permit one to conclude that the differing proportions exiting in Groups A and B result from the differential incidence of serious disability in the two groups. In this case, the exit rate for those without serious disabilities is the same for both groups (50 percent). The exit rate for those with serious disabilities is also the same (10 percent). The main difference between the examples in Part 1 and Part 2 is the much higher exit rate for those with serious disabilities in Group A in the first example.

This elementary example of a control procedure is intended to focus the reader's attention on the basic simplicity of the process of statistical controls. Given such simplicity, why have we abandoned such straight-forward cross tabulations for the more complex realm of

**Table C-1**

**A Hypothetical Example**

**Of Statistical Control Through Cross Tabulations**

Part 1

| | Group A Level of Disability | | | Group B Level of Disability | | |
|---|---|---|---|---|---|---|
| | Low | High | Totals | Low | High | Totals |
| Exit | 42 (47%) | 4 (40%) | (46%) | 25 (50%) | 5 (10%) | (30%) |
| No Exit | 48 (53%) | 6 (60%) | (54%) | 25 (50%) | 45 (90%) | (70%) |
| | 90(100%) | 10(100%) | (100%) | 50(100%) | 50(100%) | (100%) |

Part 2

| | Group A Level of Disability | | | Group B Level of Disability | | |
|---|---|---|---|---|---|---|
| | Low | High | Totals | Low | High | Totals |
| Exit | 45 (50%) | 1 (10%) | (46%) | 25 (50%) | 5 (10%) | (30%) |
| No Exit | 45 (50%) | 9 (90%) | (54%) | 25 (50%) | 45 (90%) | (70%) |
| | 90(100%) | 10(100%) | (100%) | 50(100%) | 50(100%) | (100%) |

regression analysis? Cross-tabulations, unfortunately, become impossibly unwieldy and difficult to interpret when variables contain multiple categories and when there is a need to simultaneously control for numerous variables. Both of these factors loom large in this monograph's analysis. One need only to attempt to visualize the complex table that would emerge if we were examining three groups and were controlling, simultaneously, for age at placement, family reasons for placement, child reasons for placement along with the measure of serious disability. Not only would the large number of cells require many pages to present, but even having used the space, interpretation would be ambiguous because of the necessary attempt to simultaneously compare figures from numerous and diverse cells.

Multiple regression analysis does little more than summarize the data contained in such large multi-celled tables. The summaries are easily interpretable (once one learns the definitions of a small set of coefficients); at the same time precise tests of statistical significance assist us in avoiding the tendency to make too much of small differences (a tendency often found among interpretors of cross-tabulations). Regression analysis requires assumptions with regard to variances and the shape of relationships among variables but it is a robust, reliable procedure. We find it to be the only feasible, widely utilized and understood way of carrying out the type of analysis necessary to deal directly with the conceptual issues addressed in this study.

## BASIC COEFFICIENTS OF REGRESSION ANALYSIS

The analysis presented in this monograph reports results in terms of three specific coefficients: (1) the standardized regression coefficient; (2) the unstandardized regression coefficient; and (3) $R^2$ or the coefficient of determination. The last of these, $R^2$, conveys the proportion of the variation of the dependent variable which can be attributed to the independent variables. While this indicator of the overall strength of relationship is important, the conceptual concerns of this monograph focus our attention on the other coefficients. The standardized and unstandardized coefficients summarize the partial relationships between particular independent variables and the dependent variable that exist when all other independent variables are controlled. Both coefficients communicate the same fundamental information, but in a different form. The unstandardized coefficients are expressed in the metric of the relevant variables. For example, if we examine a hypothetical relationship between a child's age in years at the time of placement and the Milestone Rate experienced while in care while controlling for other variables, an unstandardized coefficient of -.05 would mean the following: for every additional year of age at the time of placement, the number of milestones achieved per month would be .05 less. The key point to keep in mind is that the relationship is stated in terms of the actual units of the measures being examined.

The use of actual units in the description of relationships is intuitively attractive because, then, any relationship can be described in something approximating a conversational mode. However, such a presentation does inhibit our ability to determine which relationships are stronger. This results from the fact that actual metrics of analytical variables differ considerably. The regression coefficient noted in the previous paragraph would have been -.004 if age at time of placement had been measured in months rather than years. More importantly, unstandardized coefficients become very non-comparable when different types of variables are used. For example, a dichotomous variable such as one indicating ethnic group membership has only two values (0 or 1). A change of one unit for such a variable means something, in degree, quite different from a change of one unit when the measure in question is age (in years) at placement. These differences in metrics have made the use of standardized regression coefficients essential for many analytical tasks. A standardized regression coefficient expresses the partial relationship between an independent and a dependent variable in terms of standardized units -- standard deviation units. For example, a standardized regression coefficient of -.18 for the partial relationship between age at time of placement and Milestone Rate tells us that an increase of one standard deviation in age is associated with a decrease of .18 standard deviation units in the Milestone Rate. It should be noted that we would have obtained a standardized coefficient of -.18 whether age at placement had been

measured in months, years or weeks. Of equal importance it now becomes possible to compare the magnitude of relationships for variables which have very distinct metrics. Generally, within limits imposed by sampling variation which is indicated by statistical significance, a larger standardized coefficient means a stronger relationship. This is not necessarily true when unstandardized coefficients are compared across variables.

Unless otherwise indicated all regression coefficients reported in the tables of this monograph are standardized. Nevertheless, in the text we refer to metric or unstandardized coefficients on several occasions. This is so whenever a coefficient is expressed in terms of the metric of the dependent variable. This represents a compromise solution to the problem of how much information can be put in a table before the eye rebels at the effort necessary to decipher. The standardized coefficients presented in the tables permit the reader to compare the relative magnitude of relationships between diverse independent and dependent variables. The tables would have become too cluttered and complex if we had included both types of coefficients. Where we have felt that the text benefits from reference to the actual metrics, we have used the unstandardized coefficient in the text. The reader should note that because of this procedure, at times the coefficient presented in the text cannot be located precisely in the relevant table.

## LEVELS OF STATISTICAL SIGNIFICANCE

Because we are analyzing sample data rather than population data, we must focus on the issue of statistical significance. A coefficient of any given magnitude may have to be discounted in the analysis because it is deemed statistically insignificant. Even relatively large coefficients may be so discounted. This can occur for two basic reasons: (1) small sample size, and (2) a large amount of variations around a coefficient. The smaller the sample, the more likely any given coefficient could be due to chance rather than accurately reflecting the relationship which exists in the population from which the sample was taken. In this monograph we, at times, analyze relationships within subsamples such as the set of all cases in High Exit agencies. At times a coefficient which was very significant in a table computed with data from the entire sample proves insignificant in the smaller sample even though it is as large (or larger) than that found in the total sample. Even within the same sample size context, two standardized coefficients of the same size can be found significant in the one case, and insignificant in the other. This results from the greater variance around the second coefficient. This is a hazard to be found whenever entire distributions are summarized.

In this monograph we seek mainly to describe the structure of the data within the framework of the three-level model presented in Chapter 3. Consequently, we do not list a set of precise hypotheses to be either accepted or rejected. We report statistical significance in order to guard against over-interpreting results based on coefficients characterized by too high a probability of being due to chance. Our conceptual framework requires that the overall structure of relationships be examined. It is neither confirmed nor rejected by any given relationship. It is, rather, a conclusion concerning the nature of processing and outcomes of minority foster children that rests on that overall pattern. The reader will note that in the text we refer only (with indicated exceptions) to coefficients which are statistically significant. Our conclusions rest on the accumulation of such relationships.

Throughout the analysis we indicate statistical significance at three levels: .01, .05 and .10. These mean that a coefficient of a given size could appear in the sample analysis even though there is no such relationship in the population from which the sample was taken, but 1 percent, 5 percent, or 10 percent of the time. While many relationships are significant at the .001 level or beyond we do not distinguish further. We have great confidence in accumulated patterns of relationships based on levels of statistical significance such as .10. The .05 and .01 levels are reported because they too, are standard levels. The .10 level corresponds to the practice, common in econometrics, of accepting as significant all coefficients (unstandardized) which are at least twice their standard errors (without referring to actual level of statistical significance).

## THE USE OF DICHOTOMOUS VARIABLES

Many of the factors we study in this monograph can be measured only as dichotomous variables. One is considered to be a Hispanic or not; one is a Catholic or not; one has been placed in a given agency or not. In such cases, variables are coded '1' when the quality of concern is present, and '0' when it is not. When a dichotomous variable is a dependent variable it can be interpreted as the probability of belonging to a category (i.e., being coded '1'). When dichotomous variables are used as independent variables in a regression equation, one additional convention must be observed. One of the categories of a set of categories must be omitted from the equation. The omitted category then serves as the point of reference. For example, three ethnicity dichotomous variables -- Black, Hispanic and White -- are used in this analysis. In the regression, the category "White" is always omitted. The coefficients for the other ethnicity variables -- Black and Hispanic -- can be considered as deviations from the average score of Whites for whatever dependent variable is being examined (and under whatever other control conditions obtain in a given equation).

This Appendix is intended to summarize the process of statistical control, and to introduce conventions used in this monograph. Those who desire further and more detailed presentations on these and related issues would do well to consult, among others, the following references: Cohen and Cohen (1975); Blalock (1960); Wonnacott and Wonnacott (1970); Nie, et al. (1975).

## APPENDIX D

## LIST OF AGENCIES IN THE NEW YORK CITY SAMPLE

- Brooklyn Home for Children
- Cardinal Hayes
- Cardinal McCloskey
- Catholic Guardian Society of Brooklyn
- Catholic Guardian Society of New York
- Edwin Gould Services for Children
- Glie Community Youth Program
- Graham Windham Home for Children
- Harlem-Dowling Children's Services
- Jewish Board of Guardians (6 agencies)
    - Hawthorne Cedar Knolls
    - Linden Hill School
    - Stuyvesant Residence Club
    - Henry Ittleson Center
    - Infants Home of Brooklyn
    - Geller House
- Leake and Watts Children's Home
- Lincoln Hall
- Lutheran Community Services
- Madonna Heights School for Girls
- McMahon Services for Children
- Mercy Home
- New York Foundling Hospital
- St. Cabrini Home

St. Christoper/Jennie Clarkson
St. Dominic's Home
St. Mary of the Angels Home
St. Joseph's Children's Service
Sheltering Arms Children's Services
Special Schools Unit (NYC)
Special Services for Children (SSC): Bronx
Special Services for Children (SSC): Brooklyn
Special Services for Children (SSC): Manhattan
Special Services for Children (SSC): Queens
Special Services for Children (SSC): New Hope
Special Services for Children (SSC): Division of Group Homes
Special Services for Children (SSC): Division of Group Residences
Spence-Chapin
Wiltwyck
Woodycrest